	State of Rhode Office of the Secreta		Fee: \$50.00	
Division Of Business Services 148 W. River Street				
	Providence RI 02904-2615			
(401) 222-3040				
Limited Liability Com Annual Report Filing Period: September 1 In accordance with R.I.G.L.		anv failing or refusing		
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2020				
1. ID No. <u>001007447</u>				
2. Exact Name of the Limited Liability Company Warwick 96, LLC				
3. State of Formation				
State: <u>CA</u>				
ARTICLE III				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>531110</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
REAL ESTATE HOLDING COMPANY				
5. Principal Office Address				
No. and Street:1554 SHAW AVENUECity or Town:CLOVISState:CACIDVISCountry:USA				
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Contact Title: No. and Street: <u>1554 SHAW AVENUE</u>				
City or Town: <u>CLOVIS</u> State: <u>CA</u> Zip: <u>93611</u> Country: <u>USA</u>				
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name	Addre		
MANAOED	First, Middle, Last, Suffix	Address, City or Town, Sta	ate, Zip Code, Country	
MANAGER	TRENWAY, INC.	1554 SHA CLOVIS, CA 9	AW AVENUE 3611 USA	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

URS AGENTS, LLC 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 23 Day of September, 2020 at 7:18:39 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By JOHN ASHELY

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved