	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St	reet	
HOPE	Providence RI 0290 (401) 222-304		
Limited Liability Comp Annual Report Filing Period: September 1 -			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company 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>001692447</u>			
2. Exact Name of the Limited Liability Company Harbor Group Management Co., LLC			
3. State of Formation			
State: <u>VA</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>531311</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
PROPERTY MANAGEMENT FOR COMMERCIAL AND MULTIFAMILY BUILDINGS			
5. Principal Office Address	S		
No. and Street: 999 WAT City or Town: NORFOI	TERSIDE DRIVE, SUITE 2300 LK	State: <u>VA</u> Zip:	: <u>23510</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Ti No. and Street: 999 WAT City or Town: NORFOL	ERSIDE DRIVE, SUITE 2300	State: <u>VA</u> Zip:	<u>23510</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		Address
	First, Middle, Last, Suffix	Address, City of To	wn, State, Zip Code, Country
	ODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02914</u>

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

Signed this 30 Day of September, 2020 at 7:43:08 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 **DARETH JEFFERS**

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved