



State of Rhode Island
Department of State Business Services Division

FILED

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BY

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Annual Report for the year: 2020

Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000119878		2. Exact name of the Limited Liability Company Second Scobco, LLC			
3. NAICS Code 53 1110		4. Brief description of the character of business conducted in Rhode Island Real estate holdings			
5. State of Formation RI					
6. Principal Office Address 90 Elm Street			City Providence	State RI	Zip 02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Paul W. Whyte			Contact Title		
Street Address 90 Elm Street			City Providence	State RI	Zip 02903
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Pauline C. Metcalf			Manager Name Frank Mauran IV		
Street Address 90 Elm Street			Street Address 90 Elm Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person Frank Mauran IV				Date 9/29/2020	
Signature of Authorized Person Frank Mauran IV					

MAIL TO:

Division of Business Services

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