

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.

FILED	
OCT 1 5 2020	
W 2464	

1. Entity ID Number 541522		2. Exact name of the Limited Liability Company JJP RT 44 JOHNSTON, LLC					
3. NAICS Code 531390		Brief description of the character of business conducted in Rhode Island real estate development					
5. State of Formation RI							
6. Principal Office Address 1 Realty Way			City East Providence	State RI	Zip 02919		
7. Mailing Address of Limited	Liability Compa	any and Name o	r Title of Contact Person				
Contact Name Gene M. Carlino		Contact Title Resident Agent/Attorney					
Street Address 1301 Atwood Avenue, Suite 215N			City Johnston	State RI	^{Zip} 02919		
8. List ALL managers (names	s and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS		
Manager Name		Manager Name					
Street Address		Street Address	Street Address				
City	State	Zip	City	State	Zíp		
Manager Name			Manager Name				
. Street Address		Street Address					
City	State	Zip	City	State	Zip		
		L	I	Check the box to	indicate an attachment		
9. The Resident Agent inform	ation currently	of record with th	e RI Department of State is acci				
Under penalty of perjury, I o statements, and that all sta			examined this report, includire true and correct.	ng any accompanyin	g schedules and		
Name of Authorized Person Gene M. Carlino Date 10 /2 /20					'z / 20		
Signature of Authorized Person		Ca	ln				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov