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2020 OCT 19 P 1: 01

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	2 Event name of the Limit of Linds of the Community						
563744	2. Exact name of the Limited Liability Company A.N.D.LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
531120	TO OWEN,HOLD,SELL,MANAGE REAL RSTATE						
5. State of Formation							
RHODE ISLAND							
6. Principal Office Address			City	State	Zip		
35 SOUTH EAGLE NEST DRIVE			LINCOLN	RI	02865		
7. Mailing Address of Limited Lia	bility Company	and Name or Title	e of Contact Person				
Contact Name TONY W CHAN			Contact Title MANAGER				
Street Address 35 SOUTH EAGLE NEST DRIVE			City LINCOLN	State RI	Zip 02865		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name TONY W CHAN			Manager Name NANCY AH CHAN				
Street Address 35 SOUTH EAGLE NEST DRIVE		Street Address 35 SOUTH EAGLE NEST DRIVE					
<sup>City</sup> LINCOLN	State RI	<sup>Zip</sup> 02865	City LINCOLN	State RI	<sup>Zip</sup> 02865		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
		<b>.</b>	Ch	eck the box to indi	cate an attachment		
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				Date			
TONY W.CHAN, MANAGER			10/15/2020				
Signature of Authorized Person							

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED 0CT 1 9 2020

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