



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2020

Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

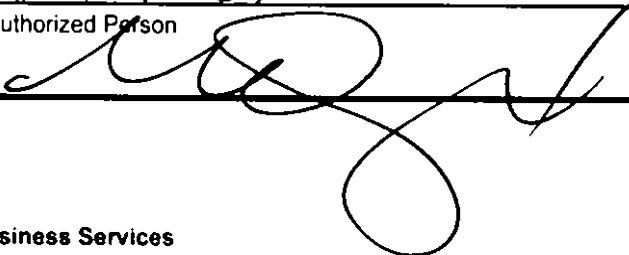
→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

FILED

OCT 20 2020

BY

1169 DS

1. Entity ID Number <u>000089995</u>		2. Exact name of the Limited Liability Company <u>TARBOX REAL ESTATE LLC</u>			
3. NAICS Code <u>531190</u>		4. Brief description of the character of business conducted in Rhode Island <u>OWN AND LEASE REAL ESTATE</u>			
5. State of Formation <u>RI</u>					
6. Principal Office Address <u>P O BOX 1890</u>			City <u>NORTH KINGSTOWN</u>	State <u>RI</u>	Zip <u>02852</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>EDWARD P TARBOX</u>			Contact Title <u>AUTHORIZED REPRESENTATIVE</u>		
Street Address <u>P O BOX 1890</u>			City <u>NORTH KINGSTOWN</u>	State <u>RI</u>	Zip <u>02852</u>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 <u>EDWARD P TARBOX</u>				Date <u>10/9/20</u>	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

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