



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 STAMP
 OCT 19 2020
1072

1. Entity ID Number 001676907		2. Exact name of the Limited Liability Company HARBOR HEIGHTS, LLC			
3. NAICS Code 53110		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE INVESTMENTS			
5. State of Formation RI					
6. Principal Office Address 24 CORLISS ST, SUITE 41167			City PROVIDENCE	State RI	Zip 02940
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name CLOVIS CZERWEIN			Contact Title REGISTERED AGENT		
Street Address PO BOX 41167			City PROVIDENCE	State RI	Zip 02940
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 CLOVIS CZERWEIN				Date 10-13-2020	
Signature of Authorized Person 					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
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 Website: www.sos.ri.gov