State of Rhode Island  Department of State - Business Services Division

	FILED STAMP
BY	CT 2 6 2020 FOR STATE USE ONLY

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 Evact name	of the Limited Lia	hility Company	$\overline{}$			
1688131	2. Exact name of the Limited Liability Company						
	Davenport, LLC						
3. NAICS Code	4. Brief descri	Brief description of the character of business conducted in Rhode Island					
531110	Own and mar	Own and manage real estate					
5. State of Formation							
RI							
6 Principal Office Address			City	State	Zip		
3948 Main Road			Tiverton	RI	02878		
7 Mailing Address of Limited Lia	ibility Company	and Name or Title	of Contact Person				
Contact Name James Holland			Contact Title Member				
Street Address 3948 Main Road			City Tiverton	State RI	Zip 02878		
8 List ALL managers (names ai	nd addresses) o	of the Limited Liabi	lity Company, IF APPLIC	ABLE - DO NOT LIST ME	MBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City	Stale	Zıp		
·	1		1	Check the box to ind	icate an attachment		
9. The Resident Agent information	on currently of r	ecord with the RI [	Department of State is a				
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							
James Holland							
Signature of Authorized Person  Par Character De Dan La Character							

MAIL TO:

Division of Business Services

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

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