

## STATE OF RHODE-ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2020

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 - FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25,00 PENALTY FEE.

1. Entity ID No.		2. Exact name of the limited liability company Doc Properties, LLC				
486723	Doc Pro					
3. State of Formation	4. Brief desc	ription of the charac	ter of business conducted in Rhod	e Island		
Rhode Island	Property	Management	,	(531110)		
5. Principal office address 667 Academy Aven	ne		City Providence	State RI	Zip 02904	
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT P	ERSON:		
Contact Name Dennis J. Lanni			Contact Title  Member			
reet Address 67 Academy Avenue			City Providence	State RI	Zip 02904	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH		RESSES) OF THE	LIMITED LIABILITY COMPANY, II	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	
B. RESIDENT AGENT IN R	HODE ISLAND		ļ	11		
		e Office of the Sec	retary of State. Changes require	fillng Form 642.		
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	FILED					

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.

Signature of Authorized Person Date

Dennis J. Lanni

Print or Type Name of Authorized Person

File Date \_\_\_\_\_
Check No \_\_\_\_\_

By: \_\_\_\_\_
FOR SECRETARY OF STATE USE ONLY

Form No. 632 Revised: 01/2012