

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. 424925		2. Exact name of the limited liability company Capron Properties, LLC				
3. State of Formation Rhode Island		Brief description of the character of business conducted in Rhode Island Property Management				
5. Principal office address 303 Jefferson Boulevard			City Warwick	State RI	Zip 02888	
6. MAILING ADDRESS O	F LIMITED LIABILIT	Y COMPANY AND NA	ME OR TITLE OF CONTACT	PERSON:		
Contact Name Steven Hamilton			Contact Title Member			
Street Address 303 Jefferson Boulevard			City Warwick	State RI	Zip 02888	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTAC		RESSES) OF THE LII	MITED LIABILITY COMPANY,	IF APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name Steven Hamilton			Manager Name			
Street Address 303 Jefferson Blvd			Street Address			
City Warwick	State RI	Zip 02888	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN	RHODE ISLAND		ı	1	1	
This Information is curre	ently of record in the	Office of the Secret	ary of State. Changes require	filing Form 642.		

FILED

OCT 26 2020

File Date ______
Check No _____

By: ____
FOR SECRETARY OF STATE USE ONLY

Form No. 632 Revised: 01/2012 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

ignature of Authorized Persor

Steven Hamilton

Print or Type Name of Authorized Person