



State of Rhode Island and Providence Plantations  
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 30 2020

**STAMP**

FOR  
SECRETARY OF STATE  
USE ONLY

|   |                 |  |                                       |                         |                     |
|---|-----------------|--|---------------------------------------|-------------------------|---------------------|
| 1. Entity ID Number<br><b>937041</b>  |                 | 2. Exact name of the Limited Liability Company<br><b>COTTA FARM LLC</b>  |                                       |                         |                     |
| 3. NAICS Code<br><b>53 110</b>  |                 | 4. Brief description of the character of business conducted in Rhode Island<br><b>Acquiring, developing, leasing, dealing in and holding property for investment</b> |                                       |                         |                     |
| 5. State of Formation<br><b>Rhode Island</b>  |                 |  |                                       |                         |                     |
| 6. Principal Office Address<br><b>895 Middle Road</b>   |                 |  | City<br><b>Portsmouth</b>             | State<br><b>RI</b>      | Zip<br><b>02871</b> |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |                 |  |                                       |                         |                     |
| Contact Name <b>Sandra A. Cotta</b>   |                 |  | Contact Title <b>Manager</b>          |                         |                     |
| Street Address <b>895 Middle Road</b>   |                 |  | City <b>Portsmouth</b>                | State <b>RI</b>         | Zip <b>02871</b>    |
| 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS  |                 |  |                                       |                         |                     |
| Manager Name <b>Sandra A. Cotta</b>   |                 |  | Manager Name <b>David M. Cotta</b>    |                         |                     |
| Street Address <b>895 Middle Road</b>   |                 |  | Street Address <b>895 Middle Road</b> |                         |                     |
| City <b>Portsmouth</b>  | State <b>RI</b> | Zip <b>02871</b>   | City <b>Portsmouth</b>                | State <b>RI</b>         | Zip <b>02871</b>    |
| 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. Resident Agent in Rhode Island This information is currently of record with the Department of State. Changes require filing Form 642.  |                 |  |                                       |                         |                     |
| <b>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.</b> |                 |  |                                       |                         |                     |
| Name of Authorized Person<br><b>Sandra A. Cotta</b>   |                 |  |                                       | Date<br><b>10/22/20</b> |                     |
| Signature of Authorized Person<br><i>Sandra A. Cotta</i>  |                 |  |                                       | SIGN DOCUMENT HERE      |                     |

**MAIL TO:**

**Division of Business Services**

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

Phone: (401) 222-3040

Website: [www.sos.ri.gov](http://www.sos.ri.gov)