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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.

1. Entity ID Number	2. Exact name of the Limited Liability Company
146436	Playa Linda Associates, LLC
3. NAICS Code: 531311	4. Brief description of the character of business conducted in Rhode Island: Manage real estate
5. State of Formation: Rhode Island	

6. Principal Office Address	City	State	Zip
61 Gooding Avenue	Bristol	RI	02809

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title		
Joseph Coelho, Sr.	Manager		
Street Address	**City**	**State**	**Zip**
3 Wendy Drive	Bristol	RI	02809

8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name			Manager Name		
Joseph Coelho, Sr.					
Street Address			**Street Address**		
3 Wendy Drive					
City	**State**	**Zip**	**City**	**State**	**Zip**
Bristol	RI	02809			
Manager Name			**Manager Name**		
Street Address			**Street Address**		
City	**State**	**Zip**	**City**	**State**	**Zip**

Check the box to indicate an attachment ☐

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	Date
Joseph Coelho, Sr., Manager	10/29/2020

Signature of Authorized Person: Joseph Coelho Sr.

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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FORM 632 - Revised: 08/2020