



State of Rhode Island
Department of State - Business Services Division

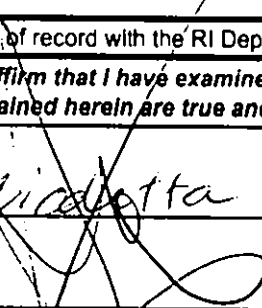
FILED

NOV 04 2020

12036 02

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 <u>000127825</u>		2. Exact name of the Limited Liability Company <u>Lost River LLC</u>			
3. NAICS Code <u>53110</u>		4. Brief description of the character of business conducted in Rhode Island <u>Real Estate Investments</u>			
5. State of Formation <u>RI</u>					
6. Principal Office Address <u>216 Gray Craig Road</u>			City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Andrew F. Nicoletta</u>			Contact Title		
Street Address <u>216 Gray Craig Road</u>			City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <u>Andrew F. Nicoletta</u>			Manager Name		
Street Address <u>216 Gray Craig Road</u>			Street Address		
City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>	City	State	Zip
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. 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 <u>Andrew F. Nicoletta</u>				Date <u>10/27/20</u>	
Signature of Authorized Person 					

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