	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business		
	148 W. River St	reet	
	Providence RI 0290		
HOPE	(401) 222-304	40	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00.		-
ANNUAL REPORT YEAR:	<u>2020</u>		
1. ID No. <u>001660010</u>			
2. Exact Name of the Limited Liability Company <u>205 Realty, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
-	Code that best describes the primary e information on <u>NAICS</u> can be found	-	[,] the entity. Download
4. Brief Description of th	e Character of the Business Which	is Actually Conducte	ed in Rhode Island
REAL ESTATE			
5. Principal Office Addre	SS		
No. and Street: 205	HALLENE ROAD		
	<u>RWICK</u> State:	<u>RI</u> Zip: <u>02886</u>	Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact F	erson:
Contact Name: Contact	Title:		
	HALLENE ROAD		
City or Town: WAF	RWICK State:	<u>RI</u> Zip: <u>02886</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Add	Iress
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country
8. RESIDENT AGENT IN F	RHODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CARL I. FREEDMAN ONE PARK ROW, SUITE 300 PROVIDENCE, RI 02903

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 11 Day of November, 2020 at 2:33:01 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>DAVID MCCURRY</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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