Annual Report for the year: 2020					FILED	
Limited Liability Company				NOV	NOV 1 2 2020 BY	
→ Filing period: Septe → Filing Fee: \$50.00 → Penalty: Additional \$						
Entity ID Number	2. Exact nam	e of the Limited L	ability Company			
1691500	DJS5 Proper	DJS5 Properties, LLC				
3. NAICS Code	4. Brief desc	Brief description of the character of business conducted in Rhode Island				
531390	Purchase, ho	Purchase, hold, develop, improve and rent real estate.				
5. State of Formation Rhode Island						
6. Principal Office Address			City	State	Zip	
32 Emerson Street			Boston	MA	02127	
7. Mailing Address of Limi		y and Name or Tit		•	•	
Contact Name David P Acciardo			Contact Title Manager			
Street Address 32 Emerson Street			City Boston	State MA	Zip <sub>02127</sub>	
		of the Limited Lia	bility Company, IF APPLIC	ABLE - DO NOT LIST I	WEMBERS	
Manager Name David P. Acciardo			Manager Name Janine M. Acciardo			
Street Address 32 Emerson Street			Street Address 32 Emerson Street			
City Boston	State MA	Zip 02127	City Boston	State MA	Zip 02127	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	

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

MAIL TO:

**Division of Business Services** 

Name of Authorized Person Pavid P. Acciardo, Manager

Signature of Authorized

State of Rhode Island

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

statements, and that all statements contained herein are true and correct.

Phone: (401) 222-3040 Website: www.sos.ri.gov