

State of Rhode Island

RECEIVED Department of State - Business Services Division BUS SVCS DIV

- 2020 OCT 21 P 3: 29:

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Annual Report for the year:	2016	ZOZO NOV	16	А	9: 35	

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.	

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1 Entity ID Number	2 Exact name of the Limited Liability Company									
000941917	1741 Corn Neck Holdings, LLC									
3. NAICS Code	Brief description of the character of business conducted in Rhode Island									
531110	Residential Rental									
5. State of Formation										
RI										
6. Principal Office Address			City	State	Zip					
1741 Corn Neck Road			Block Island	RI	02807					
	7 Mailing Address of Limited Liability Company and Name or Title of Contact Person									
Contact Name Melissa J. Hempstead			Contact Title President							
Street Address 18 Hopetown Road			City Mt. Pleasant	State SC	^{Zip} 29464					
8. List ALL managers (names ar	nd addresses)	of the Limited Liabi	lity Company, IF APPLICABLE	- DO NOT LIST ME	MBERS					
Manager Name			Manager Name							
Street Address			Street Address							
City	State	Zip	City	State	Zıp					
Manager Name			Manager Name							
Street Address			Street Address							
City	State	Zıp	City	State	Zıp					
		.	-	Check the box to ind	icate an attachment					
9. The Resident Agent information	n currently of	record with the RI [Department of State is accurat	e. Changes require fi	ling 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 Melissa J. Hempstead Date Oct. 18, 2020										
Melissa J. Hempstead				10A.1	8,2020					
Signature of Authorized Person Mellisa Designatures										

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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