



State of Rhode Island
Department of State - Business Services Division

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Annual Report for the year:
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 000140205		2. Exact name of the Limited Liability Company 512 Main Street, LLC			
3. NAICS Code 531111		4. Brief description of the character of business conducted in Rhode Island Own and manage real estate and engage in related business			
5. State of Formation RI					
6. Principal Office Address PO Box 5327		City South Kingstown	State RI	Zip 02880	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Patricia Fitzmaurice		Contact Title			
Street Address PO Box 5327		City South Kingstown	State RI	Zip 02880	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	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.					
<i>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.</i>					
Name of Authorized Person Patricia Fitzmaurice				Date 11/12/20	
Signature of Authorized Person <i>Patricia Fitzmaurice</i>					

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

FILED

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BY *[Signature]* 754XZ
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