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Department of State - Business Services Division

R.I. DEPT. OF STATE BUS SVCS DIV

2021 JAN 14 PM 1:55

Annual Report for the year: 2019
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 001675407		2. Exact name of the Limited Liability Company Brockton Pharmacy Property Development LLC				
3. NAICS Code 53 ()	4. Brief desc	Brief description of the character of business conducted in Rhode Island				
5. State of Formation Massachusetts	OPERATING	THE ACQUISITION, MAINTENANCE, HOLDING, SELLING, ASSIGNING, TRANSFERRING, OPERATING, LEASING, MORTGAGING, PLEDGING, MANAGING, AND OTHERWISE DEALING WITH REAL PROPERTY				
6. Principal Office Address 96 Main Street			City East Bridgewater	State MA	Zip 02324	
7. Mailing Address of Limited	Liability Compan	y and Name or Tit	tle of Contact Person	, , l ,		
Contact Name George P. Haseotes			Contact Title Manager			
Street Address 96 Main Street			City Enst Bridgewater	State MA	Zip 02324	
8. List ALL managers (name	s and addresses)	of the Limited Lia	bility Company, IF APPLICABL	E - DO NOT LIST A	MEMBERS	
Manager Name George P. Haseotes			Manager Name			
Street Address 96 Main Street			Street Address			
City East Bridgewater	State MA	Zip 02324	City	State	Zip	
Manager Name			Manager Name			
Sireal Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box to in	dicate an attachment	
9. The Resident Agent inform	nation currently of	record with the R	Department of State is accura			
Under penalty of perjury, I statements, and that all sta	declare and affin	n that I have exa	mined this report, including	any accompanying	schedules and	
Name of Authorized Person				Date		
George P. linaseotes		01/14/2021				
Signature of Authorized Pers	on					

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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JAN 14 2021

FORM 632 - Revised; 08/2020