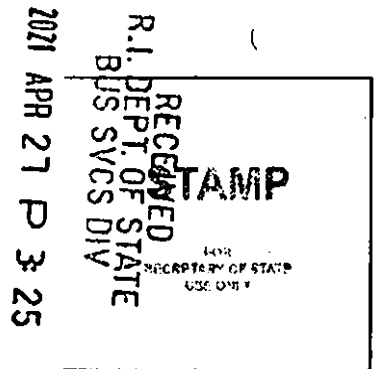




State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: **2020**

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 001661055		2. Exact name of the Limited Liability Company KTN Enterprises, LLC			
3. NAICS Code 811490		4. Brief description of the character of business conducted in Rhode Island Property Holdings			
5. State of Formation Rhode Island					
6. Principal Office Address 6 Lamoureux Blvd		City North Smithfield		State RI	Zip 02896
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name David Duplessis			Contact Title Member		
Street Address 21 Orange St			City Douglas		State MA
			Zip 01516		
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.					
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 David Duplessis				Date 4/27/2021	
Signature of Authorized Person 					

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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FORM 632 - Revised: 08/2020