



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2021

1. ID No. 000795328

2. Exact Name of the Limited Liability Company ROCKLEDGE LLC

3. State of Formation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

813312

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

TO ACQUIRE, DEVELOP, LEASE, MANAGE, DEAL, HOLD FOR INVESTMENT AND SALE, OR OTHERWISE DISPOSE OF REAL OR PERSONAL PROPERTY OR OTHER PROPERTY; TO ENGAGE IN ANY AND ALL ACTIVITIES RELATED OR INCIDENTAL THERETO; AND TO TRANSPORT OR ENGAGE IN ANY OTHER BUSINESS OR ACTIVITY PERMITTED UNDER THE RHODE ISLAND LIMITED LIABILITY COMPANY ACT.

5. Principal Office Address

No. and Street: 495 HOPE STREET
SUITE 8

City or Town: BRISTOL State: RI Zip: 02809 Country: US

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:
No. and Street: PO BOX 27

City or Town: BRISTOL State: RI Zip: 02809 Country: US

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	STEPHEN DELEO	2 HIGH ST BRISTOL, RI 028091968
MANAGER	STEPHEN DELEO	2 HIGH ST BRISTOL, RI 028091968

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

HOLLY C. JANNEY 65 NARRAGANSETT AVENUE JAMESTOWN , RI 02835

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 18 Day of May, 2021 at 12:37:42 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By STEPHEN DELEO
Signature of Authorized Person

Form No. 632
Revised 09/07

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