



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.

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 BUS SVCS DIV

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1. Entity ID Number <u>103345</u>		2. Exact name of the Limited Liability Company <u>GREEN LOT, LLC</u>	
3. NAICS Code <u>53120</u>		4. Brief description of the character of business conducted in Rhode Island <u>OWNER & MANAGER OF OFFICE BUILDING AND ASSOCIATED PROPERTY.</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>460 HARRIS AVE. UNIT 104</u>		City <u>PROVIDENCE</u>	State <u>RI</u>
		Zip <u>02909</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>PETER GILL CASE</u>		Contact Title <u>SOLE MEMBER</u>	
Street Address <u>460 HARRIS AVE. UNIT 104</u>		City <u>PROVIDENCE</u>	State <u>RI</u>
		Zip <u>02909</u>	
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
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
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 <u>PETER GILL CASE</u>			Date <u>7/7/21</u>
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

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