RI SOS Filing Number: 202101057370 Date: 9/7/2021 4:00:00 PM

	State of Rhode Island
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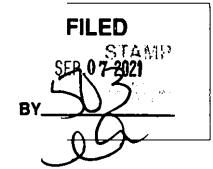
## **Department of State - Business Services Division**

Annual Report for the year: 2021 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.



Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company					
156892	REGENCY	REGENCY VACATION COMPANY, LLC					
3. NAICS Code 531210		4. Brief description of the character of business conducted in Rhode Island THE BROKERAGE AND SALE OF REAL PROPERTY					
5. State of Formation RI							
6. Principal Office Address			City	State	Zip		
940 QUAKER LANE; UNIT #1806			WARWICK	RI	02818		
7. Mailing Address of Limite	d Liability Compa	ny and Name o	r Title of Contact Person	<b>I</b>			
Contact Name RICHARD WINKLER			Contact Title CEO/SOLE MEMBER				
Street Address 940 QUAKER LANE; UNIT #1806			City WARWICK	State RI	<sup>Zip</sup> 02818		
8. List ALL managers (nami	es and addresses	) of the Limited	Liability Company, IF APPLICAL	BLE - DO NOT LIST	MEMBERS		
Manager Name RICHARI) WINKLER, SOLE MANAGER			Manager Name				
Street Address SAME			Street Address				
City	State	Ztp	City	State	Zip		
Manager Name		1	Manager Name	<u>I</u>	1		
Street Address			Street Address				
City	State	Zip	City	State	Zıp		
<del></del>				Check the box to	indicate an attachment		
9. The Resident Agent infor	mation currently o	f record with the	e RI Department of State is accu	urate. Changes requir	e filing Form 642		
Under penalty of perjury, i statements, and that all st			examined this report, including true and correct.	ng any accompanyir	g schedules and		
Name of Authorized Person				Date			
RICHARD G. WINKLER				SEPTEMBER 1, 2021			
Signature of Authorized Par	sol						

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov