



State of Rhode Island

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.

FILED

SEP 14 2021

BY 6155
DS

1. Entity ID Number <u>1668406</u>		2. Exact name of the Limited Liability Company <u>TCB OAKLAWN LLC</u>			
3. NAICS Code <u>531120</u>		4. Brief description of the character of business conducted in Rhode Island <u>Real estate holding</u>			
5. State of Formation <u>RI</u>					
6. Principal Office Address <u>64 Observatory Ave</u>		City <u>Providence</u>	State <u>RI</u>	Zip <u>02911</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>ANTHONY NATALE</u>			Contact Title <u>MANAGER</u>		
Street Address <u>SAME</u>		City	State	Zip	
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 ☐					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person <u>Anthony Natale</u>				Date <u>9/1/21</u>	
Signature of Authorized Person <u>Anthony Natale</u>					

MAIL TO:

Division of Business Services

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