

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.

000513599		2. Exact name of the Limited Liability Company 72 KICKEMUIT RD LLC				
3. NAICS Code 531110		Brief description of the character of business conducted in Rhode Island OWNERSHIP AND MANAGEMENT OF INVESTMENT REAL ESTATE				
5. State of Formation RHODE ISLAND						
Principal Office Address BUTTERWORTH AVE			City BRISTOL	State RI	Zip 02809	
7. Mailing Address of Limited		any and Name o	r Title of Contact Person			
Contact Name EDWARD J COX II			Contact Title REGISTERED AGENT			
Street Address 16 BUTTERWORTH AVE			City BRISTOL	State RI	^{Z_{IP}} 02809	
	es and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Ζιρ	City	State	Zip	
Manager Name			Manager Name		······································	
Stree: Address			Street Address			
C ty	State	Zip	City	State	Zip	
				Check the box to	indicate an attachment	
9. The Resident Agent inform	mation currently	of record with the	e RI Department of State is acc			
	declare and aff	irm that I have	examined this report, includi			
Name of Authorized Person				Date	Date	
EDWARD J COX II				09/06/2021		
Signature of Authorized Pers	son to	24			•	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.ri.gov