RI SOS Filing Number: 202101664820 Date: 9/16/2021 4:00:00 PM



Department of State - Business Services Division

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ISFP 1 6 202

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.

| 4. Father ID Alberta | Io.s. | | | | | |
|--|---|----------------------|-------------------------------|---------------------|-----------------------|--|
| 1. Entity ID Number | 2. Exact name of the Limited Liability Company | | | | | |
| 000120967 | 501 Cente | 501 Centerville LLC. | | | | |
| 3. NAICS Code | 4. Brief description of the character of business conducted in Rhode Island | | | | | |
| 531120 | Real Estate | | | | | |
| 5. State of Formation | | | | | | |
| RI | | | | | | |
| 6. Principal Office Address | | | City | State | Zip | |
| One James P. Murphy Highway Suite 200 | | | West Warwick | RI | 02893 | |
| 7. Mailing Address of Limited Lia | | y and Name or Tit | | | | |
| Contact Name Stephen G. Soscia | | | Contact Title Member | | | |
| Street Address One James P. Murphy Highway Suite 200 | | | ^{City} West Warwick, | State RI | ^{Zip} 02893 | |
| 8. List ALL managers (names a | | of the Limited Lial | bility Company. IF APPLICABL | E - DO NOT LIST I | MEMBERS | |
| Manager Name Stephen G. Soscia | | | Manager Name | | | |
| Street Address One James P. Murphy Highway Suite 200 | | | Street Address | | | |
| City West Warwick | State RI | ^{Zip} 02893 | City | State | Zip | |
| Manager Name | | | Manager Name | | | |
| Street Address | | | Street Address | | | |
| City | State | Žip | City | State | Zip | |
| | <u> </u> | 1 | | Check the box to i | ndicate an attachment | |
| 9. The Resident Agent information | on currently of | record with the RI | Department of State is accura | ite. Changes requir | e filing Form 642. | |
| Under penalty of perjury, I dec statements, and that all states | | | | any accompanyin | g schedules and | |
| Name of Authorized Person | | | | Date | | |
| Stephen G. Soscia Manager | | | | 9.2.2021 | | |
| Signature of Authorized Person | | | | | | |
| Haple Horse Mgr. | | | | | | |

MAIL TO:

Division of Business Services

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

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