



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

**FILED**

STATE

**Annual Report for the year: 2021**  
**Limited Liability Company**

SEP 21 2021

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

BY 1020

1. Entity ID Number <b>000793916</b>	2. Exact name of the Limited Liability Company <b>EAST COAST LEGACY VENTURES, LLC</b>		
3. NAICS Code 525990	4. Brief description of the character of business conducted in Rhode Island TO INVEST IN ONE OR MORE BUSINESS VENTURES		
5. State of Formation RHODE ISLAND			
6. Principal Office Address 35 SOCKANOSSET CROSS ROAD		City CRANSTON	State RI
		Zip 02920	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name WILLIAM N. JANIKIES		Contact Title MANAGER	
Street Address 35 SOCKANOSSET CROSS ROAD		City CRANSTON	State RI
		Zip 02920	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name WILLIAM N. JANIKIES		Manager Name CYNTHIA J SIMONSON	
Street Address 35 SOCKANOSSET CROSS ROAD		Street Address 35 SOCKANOSSET CROSS ROAD	
City CRANSTON	State RI	Zip 02920	City CRANSTON
			State RI
			Zip 02920
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
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.			
<b>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.</b>			
Name of Authorized Person CYNTHIA J. SIMONSON			Date 9/21
Signature of Authorized Person 			

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
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