

→ Filing Fee: \$50.00

Annual Report for the year: 2021

Limited Liability Company

→ Filing period: September 1 - November 1

OCT 2 2 2021

1. Entity ID Number	I S Evant nom	a of the Limited I	inhility Company		- (_)	
502756		Exact name of the Limited Liability Company Governor Residential Properties, I.I.C				
3. NAICS Code 531390	4. Brief descr To acquire, o	4. Brief description of the character of business conducted in Rhode Island To acquire, own, improve, operate, manage, lease, mortgage, refinance, sell and exchange real property, and all related activities.				
5. State of Formation RI	and all relate	and an related detivities.				
6 Principal Office Address			City	State	Zıp	
119 Brook Rd.			Sharon	МА	02067	
7. Mailing Address of Limited	d Liability Company	and Name or Tit	tle of Contact Person	l .	1	
Contact Name Michael Raynus			Contact Title Manager			
Street Address 119 Brook Rd.			City Sharon	State MA	Zip 02067	
8. List ALL managers (name		of the Limited Lia	bility Company, IF APPLICA	BLE - DO NOT LIST N	AEMBERS	
Manager Name Michael Raynus			Manager Name Felix Shlosman			
Street Address 119 Brook Rd.			Street Address 32 Steadman St.			
City Sharon	State MA	Z _{IP} 02067	City Brookline	State MA	Zip 02446	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box to in		
9. The Resident Agent inform	nation currently of	record with the R	I Department of State is acc	urate. Changes require	filing Form 642.	
Under penaity of perjury, I statements, and that all sta	declare and affirm atements contains	n that I have exa ed herein are tru	mined this report, includi e and correct.	ng any accompanying	g schedules and	
Name of Authorized Person	-	-		Date	 :	
Michael Raynus	1./	$\overline{}$		9/2/	/21	
Signature of Authorized Pers	son /				· .	

MAIL TO:

Division of Business Services

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

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