



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

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**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.

|   |   |                                     |                 |                    |              |
|---|---|-------------------------------------|-----------------|--------------------|--------------|
| 1. Entity ID Number<br>120970   | 2. Exact name of the Limited Liability Company<br>LINCOLN CORPORATE CENTER, LLC                         |                                     |                 |                    |              |
| 3. NAICS Code<br>531120   | 4. Brief description of the character of business conducted in Rhode Island<br>to deal with real estate |                                     |                 |                    |              |
| 5. State of Formation<br>Rhode Island   |   |                                     |                 |                    |              |
| 6. Principal Office Address<br>90 Douglas Pike  |   | City<br>Smithfield                  | State<br>RI     | Zip<br>02917-0000  |              |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |   |                                     |                 |                    |              |
| Contact Name<br>Paul T. Surabian  |   | Contact Title<br>Manager            |                 |                    |              |
| Street Address<br>90 Douglas Pike   |   | City<br>Smithfield                  | State<br>RI     | Zip<br>02917-0000  |              |
| 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS  |   |                                     |                 |                    |              |
| Manager Name<br>Paul T. Surabian  |   | Manager Name<br>Diane L. Surabian   |                 |                    |              |
| Street Address<br>164 Beacon Avenue   |   | Street Address<br>164 Beacon Avenue |                 |                    |              |
| City<br>Warwick   | State<br>RI   | Zip<br>02889                        | City<br>Warwick | State<br>RI        | Zip<br>02889 |
| Manager Name<br>Christine S. Surabian   |   | Manager Name                        |                 |                    |              |
| Street Address<br>164 Beacon Avenue   |   | Street Address                      |                 |                    |              |
| City<br>Warwick   | State<br>RI   | Zip<br>02889                        | 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.   |   |                                     |                 |                    |              |
| <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<br>Paul T. Surabian   |   |                                     | Manager         | Date<br>09/01/2021 |              |
| Signature of Authorized Person<br>  |   |                                     |                 |                    |              |

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED**

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