



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2021

1. ID No. 000100835

2. Exact Name of the Limited Liability Company SEVEN C'S, L.L.C.

3. State of Formation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

531311

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

ACQUIRING, DEVELOPING, LEASING AND DEALING IN REAL PROPERTY

5. Principal Office Address

No. and Street: 140 WYOMING AVENUE

City or Town: WARWICK

State: RI

Zip: 02888

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 931 JEFFERSON BOULEVARD, SUITE 2004

City or Town: WARWICK

State: RI Zip: 02886 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	CHRISTINE E EDINE	16 BARON COURT WARWICK, RI 02888 USA
MANAGER	ELIZABETH A SMITH	56 MARYLAND AVE

		WARWICK, RI 02888 USA
MANAGER	LOUANN ADAMS	5 LOUISIANA AVE WARWICK, RI 02888 USA
MANAGER	EILEEN J MARAIA	12 ALLARD STREET CRANSTON, RI 02920 USA
MANAGER	KATHLEEN M ETHIER	25 CARRIAGE HILL DR WARWICK, RI 02886 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

JONATHAN V. KALANDER, ESQ. 931 JEFFERSON BOULEVARD, SUITE 2004 WARWICK , RI 02886

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 8 Day of November, 2021 at 3:07:37 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By LOU ANN ADAMS
Signature of Authorized Person

Form No. 632
Revised 09/07

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