



State of Rhode Island

Department of State - Business Services Division

STAMP

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 1716297		2. Exact name of the Limited Liability Company BSV Green Hill Ocean, LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island To hold and manage real estate			
5. State of Formation RI					
6. Principal Office Address 8 Green Hill Ocean Drive		City South Kingstown	State RI	Zip 02879	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Shari Levy		Contact Title Manager			
Street Address 10 Minuteman Hill		City Westport	State CT	Zip 06880	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Shari Levy		Manager Name None			
Street Address 10 Minuteman Hill		Street Address			
City Westport	State CT	Zip 06880	City	State	Zip
Manager Name None		Manager Name None			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment ☐					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
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.					
Name of Authorized Person Shari Levy				Date 11/3/21	
Signature of Authorized Person <i>[Signature]</i> a- Power of attorney for Shari					

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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BY *[Signature]* 155