

State of Rhode Island and Providence Plantations Department of State - Business Services Division			
Annual Report for the year:2021 Limited Liability Company			
A ling period: September 1 - November 1 A ling Fee: \$50.00 A ling Fee: \$50.00 Additional \$25.00 fee if form is not filed by December 1	 		

4.5.33.10.13	10.5					
1 Entity ID Number	2. Exact name of the Limited Liability Company					
118724	CWS PROPERTIES, LLC					
3 NAICS Code	Brief description of the character of business conducted in Rhode Island					
531110	Own, lease and sell real estate properties and improvements.					
5. State of Formation	1					
RHODE ISLAND	<u> </u>					
6 Principal Office Address			City	State	Zıp	
1425 PARK AVENUE	CRANSTON			RI	02920	
Mailing Address of Limited Liab	ility Company a	nd Name or Titl	e of Contact Person			
ontact Name			Contact Title			
Michael A. Kearney		Manager				
Street Address			City	State	Ζιp	
1425 PARK AVENUE			CRANSTON	RI	02920	
8 List ALL managers (names and	addresses) of th	e Limited Liabilit	ly Company, IF APPLICABL	.E - DO NOT LIST MEM	BERS	
Manager Name			Manager Name			
Michael A. Kearney		William T. Heaton				
Street Address		Street Address				
1425 PARK AVENUE			1425 PARK AVEN	•		
City	State	Zip	City	State	Zıp	
CRANSTON	RI	02920	CRANSTON	RI	02902	
Manager Name Manager Name						
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
	·	1		heck the box to indicate	e an attachment	
9. Resident Agent in Rhode Island	This information	is currently of re	cord with the Department of S	State. Changes require filing	Form 642	
Under penalty of perjury, I declar						
statements, and that all statements	contained herei	in <mark>are true</mark> and c	correct.	3,p,3		
Name of Authorized Person				Date	Date 1/-4-201	
			11-4-	11-4-20		
Michael A. Kearney						
Signature of Authorized Person Wiehaul A. Kearney						

MAIL TO:

Division of Business Services

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

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

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FORM 632 - Revised 10/2017