

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.

	B O VOM	
BY_	_01_	1290

1. Entity ID Number		ne of the Limited L	eblity Company EET LIMITED, I	LLC			
3 NAICS Code		4 Brief description of the character of business conducted in Rhode Island					
531390	TO OWN, L	TO OWN, LEASE AND SELL RESL PROPERTY AND IMPROVEMENTS					
5 State of Formation							
RHODE ISLAND							
6. Principal Office Address			C ty	State	Zıp		
2457 POST ROAD			WARWICK	RI	02886		
7. Mailing Address of Limited	d Liability Compan	y and Name or Tit	le of Contact Person	<u></u>			
Contact Name MICHAEL P. WINTER			Contact Title MANAGER				
Street Address 2457 POST ROAD			C:y WARWICK	Slate RI	Z p 02886		
8 List ALL managers (name	es and addresses)	of the Limited Lia	b lity Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS		
Manager Name MICHAEL P. WINTER			Manager Name				
Street Address 2457 POST ROAD			Street Address				
City WARWICK	State RI	ZID 02886	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zıp		
		1		Check the box to	indicate an attachment		
9. Resident Agent in Rhode	Island, This informa	ation is currently of re	ecord with the Department of Sta	ate. Changes require fil-	ng Form 642		
Under penalty of perjury, I statements, and that all st			mined this report, includir e and correct.	ng any accompanyir	ng schedules and		
Name of Authorized Person				Date /	/		
MICHAEL P. WINTER				11/2	13021		
Signature of Surhor zed Per	PUK	MITTER	CAUTO NEMERE				

MAIL TO:

Division of Business Services

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

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