RI SOS Filing Number: 202104984150 Date: 11/9/2021 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

R.H. DEPT. OF STATETAMP BUS SVCS DIV

2021 NOV -9 PM 1: 27 TUSE ONLY

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	2. Exact name of the Limited Liability Company				
000163523	SAW MILL SQUARE DEVELOPMENT COMPANY, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531311	TO OWN AND MANAGE REAL ESTATE				
5. State of Formation					
RHODE ISLAND					
6. Principal Office Address			City	State	Zip
1130 TEN ROD ROAD, SUITE E-207			NORTH KINGSTOWN	RI	02852
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name LYNN F. MORAN			Contact Title		
Street Address 1130 TEN ROD ROAD, SUITE E-207			City NORTH KINGSTOWN	State RI	Zip 02852
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name NONE			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
		1	Che	I ack the box to in	ndicate 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 Date					
LYNN F. MORAN) 8021
Signature of Authorized Person					

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 C

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