

R.H. DEPT. OF STATETAMP BUS SVCS DIV

2021 NOV -9 PM 1: 27 TIGHT OF STATE

Annual Report for the year:	2021
Limited Liability Company	<u> </u>

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by December 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 Lia		and Name or Title	of Contact Person	1 .			
Contact Name LYNN F. MORAN			Contact Title				
Street Address 1130 TEN ROD ROAD, SUITE E-207		-207	City NORTH KINGSTOWN	State RI	Zip 02852		
	nd addresses) o	f the Limited Liabi	lity Company, IF APPLICABLE - [OO NOT LIST I	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		
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 Date							
LYNN F. MORAN 10 20 302 (
Signature of Authorized Person							
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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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BY Ca Ca# 1655

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