

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2016

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

550710	VEL Lenders, LLC					
3. State of Formation	Brief description of the character of business conducted in Rhode Island Real Estate					
Rhode Island	Trous Est	210				
5. Principal office address One Wellington Road			City Lincoln	State RI	Zip 02865	
	MITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT	PERSON;		
ontact Name Kevin M. Daley, Esq.			Contact Title Attorney			
Street Address 1383 Warwick Avenue			City Warwick	State RI	Zip 02888	
7. LIST <u>ALL</u> MANAGERS (NA ("X" BOX FOR ATTACHME	NMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY,	FAPPLICABLE - DO	NOT LIST MEMBERS	
lanager Name			Manager Name			
Street Address	Idress			Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
B. RESIDENT AGENT IN RHO	DE ISLAND	L			<u> </u>	
This information is currently	of record in the	Office of the Secr	retary of State. Changes require	filing Form 642.		
	ВҮ	FILED NOV 2 9 201				
Flie Date			this report, includin	riury, I declare and aff g any accompanying nts contained herein :	firm that I have examined schedules and statement are true and correct.	
Check No			Jun.		11/21/16	
By:	Carolin Community of the		Signature of Authoriz	ed Person	Date	
FOR SECRETARY OF STAT	E USE ONLY			Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012