State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP

Annual Report for the year: __2017__
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 **487439**	2. Exact name of the Limited Liability Company **156 Westminster Tenant, LLC**			
3. NAICS Code **531120**	4. Brief description of the character of business conducted in Rhode Island **To own, operate, manage and develop real property.**			
5. State of Formation **RI**				

6. Principal Office Address **160 Westminster Street, Suite 400**	City **Providence**	State **RI**	Zip **02903**

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name **Antonio Afonso, Jr.**	Contact Title **Member**		
Street Address **160 Westminster Street, Suite 400**	City **Providence**	State **RI**	Zip **02903**

8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS

Manager Name **156 Westminster Manager, LLC**			Manager Name		
Street Address **160 Westminster Street, Suite 400**			Street Address		
City **Providence**	State **RI**	Zip **02903**	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. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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 **Antonio Afonso, Jr.**	Date **10/25/17**
Signature of Authorized Person SIGN DOCUMENT HERE	

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

OCT 25 2017

BY __1879 KM__

FORM 632 - Revised: 08/2017