State of Rhode Island
Department of State - Business Services Division

FILED

SEP 1 4 2020

BY_____

Annual Report for the year: 2020
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 584817	2. Exact name of the Limited Liability Company 95 Lake Garden Drive LLC		
3. NAICS Code 531390	4. Brief description of the character of business conducted in Rhode Island own, develop, operate and maintain real estate		
5. State of Formation RI			

6. Principal Office Address 263 Walnut St.	City Fall River	State MA	Zip 02720

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

Contact Name Andrew Shabshelowitz	Contact Title Manager		
Street Address 263 Walnut St.	City Fall River	State MA	Zip 02720

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

Manager Name Michele Lederberg			Manager Name		
Street Address 131 Laurel Ave.			Street Address		
City Providence	State RI	Zip 02906	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 Andrew Shabshelowitz	Date 9/9/2024
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