

FILED
OCT 13 2020 PTAMP

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	2. Exact name of the Limited Liability Company					
99873	C.I.A., LLC					
3. NAICS Code 53110	Brief description of the character of business conducted in Rhode Island Residential real estate rentals					
5. State of Formation RI						
6. Principal Office Address			City	State	Zip	
1580 Wampanoag Trail, #200E			Barrington	RI	02806	
7. Mailing Address of Limited Li		y and Name or Ti		· · · · · · · · · · · · · · · · · · ·	•	
Contact Name Christopher E. Cuzzone			Contact Title Operating Manager			
Street Address 25 Knapton St.			City Barrington	State RI	Z _{IP} 02806	
8. List ALL managers (names a		of the Limited Lia			MEMBERS	
Manager Name Christopher E. Cuzzone		Manager Name John F. Cuzzone, III				
Street Address 25 Knapton St.		Street Address 12 Pine Cone Dr.				
City Barrington	State RI	Zip 02806	City Barrington	State RI	^{Z₁p} 02806	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box to i	ndicate an attachment	
9. The Resident Agent informat						
Under penalty of perjury, I de statements, and that all state				g any accompanyin	g schedules and	
Name of Authorized Person			Date	Date		
Christopher E. Cuzzone			10/05/2020			
Signature of Authorized Person	\$ /) UN 0				
	(] () ——				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov