



State of Rhode Island
Department of State - Business Services Division

FILED

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Annual Report for the year:

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 160489		2. Exact name of the Limited Liability Company TRAIL ASSOCIATES, LLC			
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island Real estate investment			
5. State of Formation RI					
6. Principal Office Address 1481 Wampanoag Trail		City East Providence	State RI	Zip 02915	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Gary D'Ambra		Contact Title Member			
Street Address 1481 Wampanoag Trail		City East Providence	State RI	Zip 02915	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name None		Manager Name None			
Street Address		Street Address			
City		State	Zip	City	
Manager Name None		Manager Name None			
Street Address		Street Address			
City		State	Zip	City	
Check the box to indicate an attachment <input type="checkbox"/>					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person Gary D'Ambra				Date 10-9-2020	
Signature of Authorized Person 					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
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 Website: www.sos.ri.gov