



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

FILED

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.

NOV 04 2020
 BY 3825
 [Signature]

1. Entity ID Number 000099502		2. Exact name of the Limited Liability Company Treasured Island Associates, LLC			
3. NAICS Code 551112		4. Brief description of the character of business conducted in Rhode Island Holding Real Estate			
5. State of Formation GA					
6. Principal Office Address 4 Washington Avenue			City Westport	State CT	Zip 06880
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Karen Turner			Contact Title Member		
Street Address 18 Southgate Avenue			City Annapolis	State MD	Zip 21401
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Karen Turner			Manager Name		
Street Address 18 Southgate Avenue			Street Address		
City Annapolis	State MD	Zip 21401	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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 Karen Turner				Date 11-23-2020	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

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