



State of Rhode Island  
**Department of State - Business Services Division**

**FILED STAMP**

**Annual Report for the year: 2021**  
**Limited Liability Company**

AUG 12 2021

BY

1438 DS

- 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 977956		2. Exact name of the Limited Liability Company MFP ASSOCIATES, LLC			
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island to own, develop, and invest in real estate			
5. State of Formation Rhode Island					
6. Principal Office Address 1800 Mineral Spring Avenue		City North Providence	State RI	Zip 02904-0000	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Patricia Simone		Contact Title Manager			
Street Address 1800 Mineral Spring Avenue		City North Providence	State RI	Zip 02904-0000	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Patricia Simone		Manager Name			
Street Address 9 Meadow Avenue		Street Address			
City Johnston	State RI	Zip 02919	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. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
<b>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.</b>					
Name of Authorized Person Patricia Simone			Manager		Date 09/01/2021
Signature of Authorized Person <i>Patricia Simone</i>					

**MAIL TO:**  
**Division of Business Services**  
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 Website: www.sos.ri.gov