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State of Rhode Island
Department of State - Business Services Division

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BY

Annual Report for the year: 2021
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 124312	2 Exact name of the Limited Liability Company Grove Avenue Associates, LLC		
3 NAICS Code 53111O	4 Brief description of the character of business conducted in Rhode Island Own and rent real estate		
5 State of Formation RI			
6 Principal Office Address One Grove Avenue	City East Providence	State RI	Zip 02914
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Robert M Brady	Contact Title Agent		
Street Address One Grove Avenue	City East Providence	State RI	Zip 02914
8 List **ALL** managers (names and addresses) of the Limited Liability Company IF APPLICABLE - **DO NOT LIST MEMBERS**			
Manager Name	Manager Name		
Street Address	Street Address		
City / State / Zip	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	Date 9/2/21		
Signature of Authorized Person			

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