



State of Rhode Island

Department of State - Business Services Division

FILED

SEP 09 2021

BY 1151
09Annual 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 001658437		2. Exact name of the Limited Liability Company 1085 Waterman Avenue, LLC	
3. NAICS Code 53 1110		4. Brief description of the character of business conducted in Rhode Island Real Estate and Rental	
5. State of Formation Rhode Island			
6. Principal Office Address 60 Colvin Street Box 357		City Hope	State RI
		Zip 02831	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Anthony D. Altrui		Contact Title Manager	
Street Address 60 Colvin Street Box 357		City Hope	State RI
		Zip 02831	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name		Manager	
Street Address		Street Address	
City		Zip	
02831		02831	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
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 Anthony D. Altrui		Date 9/5/2021	
Signature of Authorized Person			

MAIL TO:

Division of Business Services

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