

State of Rhode Island

## **Department of State - Business Services Division**

FillED

SEP 2 7 2029

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 000540839	2. Exact name of the Limited Liability Company AVA PROPERTIES, LLC					
3. NAICS Code 236117	Brief description of the character of business conducted in Rhode Island     HOLDS REAL ESTATE					
5. State of Formation RI						
Principal Office Address     1308 ATWOOD AVENUE			City JOHNSTON	State RI	Zip 02919	
7. Mailing Address of Limited Lia		ny and Name or Ti	itle of Contact Person			
Contact Name LOUIS A. POLSENO			Contact Title RESIDENT AGENT			
Street Address 1308 ATWOOD AVENUE			City JOHNSTON	State RI	<sup>Zıp</sup> 02919	
8. List ALL managers (names a	nd addresses	s) of the Limited Lia	ability Company, IF APPLICAE	BLE - DO NOT LIST N	IEMBERS	
Manager Name N/A			Manager Name N/A			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
Manager Name N/A			Manager Name N/A			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
		<del></del>		Check the box to in	ndicate an attachment	
9. The Resident Agent informati	on currently o	of record with the R	RI Department of State is accu	rate. Changes require	e filing Form 642.	
Under penalty of perjury, I dec statements, and that all stater	clare and affi ments contai	irm that I have exi ined herein are tru	amined this report, including we and correct.	g any accompanying	schedules and	
Name of Authorized Person				Date	Date	
LOUIS A. POLSENO				09/16/2	09/16/21	
Signature of Authorized Person	7	_ <				

MAIL TO:

**Division of Business Services** 

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