



State of Rhode Island

Department of State - Business Services Division

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.

OCT 14 2021

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1. Entity ID Number 001685954		2. Exact name of the Limited Liability Company 9 DROWNE STREET, LLC			
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE HOLDING			
5. State of Formation RI					
6. Principal Office Address 9 DROWNE STREET			City CRANSTON	State RI	Zip 02905
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JOSEPH R. BOISVERT			Contact Title MEMBER		
Street Address 303 MAIN STREET			City WARWICK	State RI	Zip 02886
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name N/A			Manager Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name N/A			Manager Name N/A		
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					
<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 JOSEPH R. BOISVERT				Date 10/01/21	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

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