



State of Rhode Island  
Department of State – Business Services Division

**FILED**

**ANNUAL REPORT FOR THE YEAR 2021**  
**LIMITED LIABILITY COMPANY**

OCT 18 2021

BY

1133  
*[Signature]*

- **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 No <b>001712284</b>		2. Exact name of the Limited Liability Company <b>3474 Kingstown Road, LLC</b>			
3. NAICS Code <b>531110</b>		4. Brief description of the character of business conducted in Rhode Island <b>real estate management</b>			
5. State of Formation <b>Rhode Island</b>					
6. Principal Office Address <b>228 Blackberry Hill Drive</b>		City <b>Wakefield</b>		State <b>RI</b>	Zip <b>02879</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person <b>Alexander S. Bowen</b>					
Street Address <b>228 Blackberry Hill Drive</b>		Street Address			
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>	City	State	Zip
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE – DO NOT LIST MEMBERS					
Manager Name <b>Alexander S. Bowen</b>		Manager Name <b>Nicholas W. Bowen</b>			
Street Address <b>228 Blackberry Hill Drive</b>		Street Address <b>228 Blackberry Hill Drive</b>			
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>	City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>
Manager Name <b>Wendy W. Bowen</b>		Manager Name			
Street Address <b>228 Blackberry Hill Drive</b>		Street Address			
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of 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.

*[Signature]*  
Signature of Authorized Person

9/3/21

Date

**Alexander S. Bowen**

Name of Authorized Person

MAIL TO:  
Division of Business Services  
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Website: [www.sos.ri.gov](http://www.sos.ri.gov)