



State of Rhode Island
Department of State - Business Services Division

FILING STAMP

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 20 2021
 BY 10302
DS

| | | | | | |
|---|-------|--|---------------|------------------|-----|
| 1. Entity ID Number 156482 | | 2. Exact name of the Limited Liability Company CVA Developers, LLC | | | |
| 3. NAICS Code 531390 | | 4. Brief description of the character of business conducted in Rhode Island Acquire entity and/or various other interests, conduct all activities related, necessary or incidental thereto. | | | |
| 5. State of Formation Rhode Island | | | | | |
| 6. Principal Office Address 5 Cathedral Square | | City Providence | State RI | Zip 02903 | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | | |
| Contact Name Scott Gaudreau | | | Contact Title | | |
| Street Address 5 Cathedral Square | | City Providence | State RI | Zip 02903 | |
| 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 <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 Scott Gaudreau, Vice President/ Treasurer of Cathedral Development Group, Inc. | | | | Date 10/20/21 | |
| Signature of Authorized Person | | | | | |

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov