



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.

FILED

OCT 21 2021

BY 8/116

STAMP

FOR
SECRETARY OF STATE
USE ONLY

1. Entity ID Number 001691501		2. Exact name of the Limited Liability Company Morrison Farm, LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Own and manage real estate			
5. State of Formation RI					
6. Principal Office Address 571 Ocean Avenue			City Newport	State RI	Zip 02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Pamela Adams			Contact Title Member		
Street Address 571 Ocean Avenue			City Newport	State RI	Zip 02840
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 ☐					
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 Pamela Adams				Date 10/14/2021	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services
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Phone: (401) 222-3040
Website: www.sos.ri.gov