



State of Rhode Island  
**Department of State - Business Services Division**

FILED STAMP

OCT 28 2021

BY SL 1486

**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 <b>001667681</b>		2. Exact name of the Limited Liability Company <b>MS MORVAN MASONRY, LLC</b>			
3. NAICS Code 238140		4. Brief description of the character of business conducted in Rhode Island MASONRY			
5. State of Formation RI					
6. Principal Office Address 30 OLD PINE ROAD		City NARRAGANSETT	State RI	Zip 02882	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name MARK MORVAN		Contact Title MEMBER			
Street Address 30 OLD PINE ROAD		City NARRAGANSETT	State RI	Zip 02882	
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 MARK MORVAN				Date 10/12/21	
Signature of Authorized Person <i>Mark Morvan</i>				<i>10/29/2021</i>	

**MAIL TO:**  
 Division of Business Services  
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