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	2. Exact name of the Limited Liability Company				
509257	Elephant Rock LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
53/320	4. Brief description of the character of business conducted in Rhode Island - Real ESTATE OWNERSHUP & MANAGEMENT				
5. State of Formation $\mathcal{R}\mathcal{I}$,		
8. Principal Office Address 8. AVTA VISTA DIWE			thenseton	State	^{zip} 08540
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person .					
Contact Name Jales Tolans			Contact Title aunce & manager		
Street Address 8 A/TA VISA AR			City Princeton	State NJ	z10 08540
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE, - DO NOT LIST MEMBERS					
Manager Name Jales TOLAND			Manager Name Holly Alves		
Street Address 8 AM VISTA AR			Street Address 265 BASAM Lane		
city huce ton	State Zip	BS4V	Waterbury lente	State Vermi	1 05677
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 ONLY TOLANS IN 11/4/21					4/21
Signature of Authorized Person IDIANU TO					
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MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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