

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.

	NOV 1 6 2021
BY_	0109

1. Entity ID Number 0.01669473	2. Exact name of the Limited Liability Company MENDON ROAD PARTNERS LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
531120	REAL ESTATE HOLDING						
5. State of Formation	1						
RHODE ISLAND							
6. Principal Office Address		•	City	State	Zip		
519 MENDON ROAD			CUMBERLAND	RI	02864		
7. Mailing Address of Limited Li	ability Compa	any and Name o	r Title of Contact Person	· · · · · · · · · · · · · · · · · · ·			
Contact Name GARY R ALGER			Contact Title AGENT	Contact Title AGENT			
Street Address PO BOX 8000			City CUMBERLAND	State RI	^{Zıp} 02864		
8. List ALL managers (names a	ind addresse	s) of the Limited	Liability Company, IF APPLICABLE	E - DO NOT LIST	MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zıp		
Manager Name			Manager Name				
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
	<u>.</u>	<u>-</u>		Check the box to	indicate an attachment		
9. The Resident Agent informati	ion currently	of record with the	e RI Department of State is accura-	te. Changes requir	e filing Form 642.		
Under penalty of perjury, I de statements, and that all state			examined this report, including a true and correct.	any accompanyin	g schedules and		
Name of Authorized Person				Date			
GARY R ALGER			11/04/2021				
Signature of Authorized Person	41	1/		•			
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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