RI SOS Filing Number: 202211001090 Date: 2/16/2022 1:08:00 PM

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State of Rhode Island

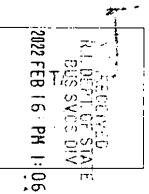
## **Department of State - Business Services Division**

Annual Report for the year: 2021 Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty<sup>-</sup> Additional \$25.00 fee if form is not filed by May 31.



|  |                                    |  |                 | * Q)                     |  |
|--|------------------------------------|--|-----------------|--------------------------|--|
| 1. Entity ID Number<br>001673626               |                                    | 2. Exact name of the Limited Liability Company  EXECUTIVE HOLDINGS, LLC  |                 |                          |  |
| 3. NAICS Code<br>531110                        |                                    | Brief description of the character of business conducted in Rhode Island     REAL ESTATE LEASING AND DEVELOPMENT |                 |                          |  |
| 5. State of Formation RHODE ISLAND             |                                    |  |                 |                          |  |
| 6. Principal Office Address 162 COLEBROOK ROAD |                                    | City<br>LITTLE COMPTON   | State<br>RI     | Z <sub>ip</sub><br>02837 |  |
| 7. Mailing Address of Limit                    | ed Liability Company and Name      | or Title of Contact Person   |                 | <b></b>                  |  |
| Contact Name JACQUELINE P SMITH                |                                    | Contact Title MEMBER   |                 |                          |  |
| Street Address 162 COLEBROOK ROAD              |                                    | City LITTLE COMPTON  | State RI        | <sup>Zip</sup> 02837     |  |
| 8. The Resident Agent info                     | rmation currently of record with t | he RI Department of State is accurate. C   | hanges require  | e filing Form 642.       |  |
| Under penalty of perjury,                      |                                    | e examined this report, including any  |                 |                          |  |
| Name of Authorized Person JACQUELINE P SMITH   |                                    |  | Date 01/10/2022 |                          |  |
| Signature of Authorized Pe                     | erson  Son                         | The  | 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 FEB 1 6 2022 BAR D P 8 K 3