

Annual Report for the year: 23 Limited Liability Company

- → Filing period. February 1 May 1.
- → Filing Fee \$50 00
- → Penalty Additional \$25.00 fee if form is not filed by May 31

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1 Entry ID Number () - () - () - () - () - () ()	2. Exact name of the Limited Liability Company SERVICE AREA 5 CABLE LLC				
3 NAICS Code 517111 5. State of Formation RHODE ISLAND	Bnef description of the character of business conducted in Rhode Island Telecommunications				
6 Principal Office Address 57 EVERETT STREET		C _{ty} WARREN	State RI	Z _p 02885	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Cortact Name JANET UNAN	IGST	T Contact Title BUSINESS OPERATIONS MANANGER			
Street Address 57 EVERETT STREET		Cry WARREN	State RI	^{Ζφ} 02885	
8 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		Date	Date		
JANET UNANGST		01/31/2023			
Signature bly Authorized Person			-		

Division of Business Services 148 W River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Websita: www.sos.n.gov