



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

**FILED**

FEB 06 2023

BY

**Annual Report for the year:** 2023  
**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.

1. Entity ID Number <b>88932</b>		2. Exact name of the Limited Liability Company <b>RIVERVIEW MOBILE HOME LLC</b>		
3. NAICS Code <b>531110</b>		4. Brief description of the character of business conducted in Rhode Island <b>MOBILE HOME</b>		
5. State of Formation <b>RHODE ISLAND</b>				
6. Principal Office Address <b>74 HONEYMAN AVENUE</b>		City <b>MIDDLETOWN</b>	State <b>RI</b>	Zip <b>02842</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name <b>JEFFREY LEMLER</b>		Contact Title		
Street Address <b>2 REARDON DRIVE</b>		City <b>MIDDLETOWN</b>	State <b>RI</b>	Zip <b>02842</b>
8. 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 <b>JEFFREY LEMLER</b>			Date <b>2/2/23</b>	
Signature of Authorized Person <i>Jeffrey Lember, Guardian</i>				

**MAIL TO:**  
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