

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2023
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.

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1097	8 8.

5. State of Formation Rhode Island 6 Principal Office Address 44 Beech Tree Place	•	ion of the chara	cter of business conducted	I in Rhode Island				
5. State of Formation Rhode Island 6 Principal Office Address 44 Beech Tree Place	Real estate							
Rhode Island 6 Principal Office Address 44 Beech Tree Place			Real estate					
6 Principal Office Address 44 Beech Tree Place								
44 Beech Tree Place				~	•			
			City	State	Zip			
	44 Beech Tree Place			RI	02872			
Mailing Address of Limited Liabili	ity Company a	nd Name or Title	e of Contact Person	l				
Contact Name Joseph Rooney			Contact Title Member					
Street Address 44 Beach Tree Place		City Wakefield	State RI	^{Zıp} 02879				
8. List ALL managers (names and	addresses) of	the Limited Liab	ility Company, IF APPLICA	BLE - DO NOT LIST I	MEMBERS			
Manager Name		Manager Name						
Street Address		Street Address						
City	tate	Zıp	City	State	Zip			
Manager Name			Manager Name					
Street Address			Street Address					
City	tate	Zıp	City	State	Zip			
				Check the box to it	 ndicate an attachment ☐			
9. Resident Agent in Rhode Island.	This information	is currently of rec	cord with the Department of St					
Under penalty of perjury, I declar statements, and that all statemen	re and affirm t nts contained	hat I have exan herein are true	nined this report, includit and correct.	ng any accompanyin	g schedules and			
Name of Authorized Person			/	Date				
Joseph Rooney			/ //	/				
Signature of Authorized Person		JANE E						

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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