



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

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**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 000103455		2. Exact name of the Limited Liability Company Jefferson Hotel Associates, LLC	
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Ownership and Development of Real Estate	
5. State of Formation Rhode Island			
6. Principal Office Address 1414 Atwood Avenue		City Johnston	State RI
		Zip 02919	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Kelly Coates		Contact Title Authorized Trustee	
Street Address 1414 Atwood Avenue		City Johnston	State RI
		Zip 02919	
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 Kelly Coates		Date 1/30/2023	
Signature of Authorized Person <i>Kelly M. Coates, Trustee</i>			

**FILED**

FEB 10 2023  
 BY ML 024696

**MAIL TO:**  
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