



State of Rhode Island
Department of State - Business Services Division

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.

FILED **STAMP**
FEB 27 2023
 BY 41198
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|---|--|--|-------------|
| 1. Entity ID Number 1721123 | | 2. Exact name of the Limited Liability Company 14 Village LLC | |
| 3. NAICS Code 531390 | | 4. Brief description of the character of business conducted in Rhode Island Real Estate | |
| 5. State of Formation RI | | | |
| 6. Principal Office Address PO Box 72 | | City Marlborough | State MA |
| | | Zip 01752 | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name Michael W. Miller | | Contact Title Registered Agent | |
| Street Address 122 Touro Street | | City Newport | State RI |
| | | Zip 02840 | |
| 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 PATRICIA STUCKERT | | Date 02/10/2023 | |
| Signature of Authorized Person <i>[Handwritten Signature]</i> | | | |

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