



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**FILED**

FEB 27 2023

BY

*[Handwritten signature]*

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.

|   |                 |   |                              |                             |                          |
|---|-----------------|---|------------------------------|-----------------------------|--------------------------|
| 1. Entity ID Number<br><b>001684828</b>   |                 | 2. Exact name of the Limited Liability Company<br><b>693 CORN NECK ROAD, LLC</b>                          |                              |                             |                          |
| 3. NAICS Code<br><b>531110</b>  |                 | 4. Brief description of the character of business conducted in Rhode Island<br><b>Real Estate Holding</b> |                              |                             |                          |
| 5. State of Formation<br><b>Rhode Island</b>  |                 |   |                              |                             |                          |
| 6. Principal Office Address<br><b>122 Green Mountain Pl</b>   |                 |   | City<br><b>Middlebury</b>    | State<br><b>VT</b>          | Zip<br><b>05753-1394</b> |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |                 |   |                              |                             |                          |
| Contact Name <b>Priscilla Bremser</b>   |                 |   | Contact Title <b>Manager</b> |                             |                          |
| Street Address <b>122 Green Mountain Pl</b>   |                 |   | City <b>Middlebury</b>       | State <b>VT</b>             | Zip <b>05753-1394</b>    |
| 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS  |                 |   |                              |                             |                          |
| Manager Name <b>Priscilla Bremser</b>   |                 |   | Manager Name                 |                             |                          |
| Street Address <b>122 Green Mountain PL</b>   |                 |   | Street Address               |                             |                          |
| City <b>Middlebury</b>  | State <b>VT</b> | Zip <b>05753</b>  | City                         | State                       | Zip                      |
| Manager Name  |                 |   | Manager Name                 |                             |                          |
| Street Address  |                 |   | Street Address               |                             |                          |
| City  | State           | Zip   | City                         | State                       | Zip                      |
| Check the box to indicate an attachment <input type="checkbox"/>  |                 |   |                              |                             |                          |
| 9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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<br><b>PRISCILLA S. BREMSER</b>  |                 |   |                              | Date<br><b>FEB 17, 2023</b> |                          |
| Signature of Authorized Person<br><i>[Handwritten Signature]</i>  |                 |   |                              | SIGN DOCUMENT HERE          |                          |

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
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