

2023 Annual Report for the year:

STAMP FILED

**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.

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BY 1009	3

1. Entity ID Number 1745946		2. Exact name of the Limited Liability Company ISLAND HOUSE NEWPORT LLC		
3. NAICS Code 531190	Brief description of the character of business conducted in Rhode Island     REAL ESTATE			
5. State of Formation RHODE ISLAND				
6. Principal Office Address  950 WARREN AVENUE SUITE 401  EAST PROVIDENCE		State RI	Zip 02914	
7. Mailing Address of Limite	d Liability Company and Name	or Title of Contact Person	· ·	
Contact Name LIANNE MAI	RSHALL	Contact Title MANAGER	Contact Title MANAGER	
Street Address 950 WARREN AVENUE SUITE 401		City EAST PROVIDENCE	State RI	Z <sub>IP</sub> 02914
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
Under penalty of perjury, statements, and that all st	l declare and affirm that I hav latements contained herein a	e examined this report, including an re true and correct.	y accompanyin	g schedules and
Name of Authorized Person		Date		
LIANNE MARSHALL		03-14-2023		
Signature of Authorized Per	son harsh	all		

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov