

STAMP

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 000897074	2. Exact name of the Lin LgMaloncy LLC	Exact name of the Limited Liability Company     LgMaloncy LLC      Brief description of the character of business conducted in Rhode Island     Investment and real estate holdings.			
3. NAICS Code 531110 5. State of Formation RI					
6. Principal Office Address		City	State	Zip	
70 Fowler Street		North Kingstown	RI	02852	
7. Mailing Address of Limite	d Liability Company and Name	e or Title of Contact Person	<u> </u>		
Contact Name Lorraine G. Maloney		Contact Title Owner			
Street Address 1122 Algare Loop		City Windemere	State FL	Zip 34786	
8. The Resident Agent inform	mation currently of record with	the RI Department of State is accura	rate. Changes require	e filing Form 642.	
	l declare and affirm that I hav tatements contained herein a	ve examined this report, including are true and correct.	any accompanyin	g schedules and	
Name of Authorized Person	** ** ** *	•	Date		
Lorraine G. Maloney 4-5-2-3					
Signature of Authorized Pers	son				

MAIL TO:

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

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