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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: $\frac{2023}{}$ **Limited Liability Company**

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→ 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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1. Entity ID Number	2. Exact name of the Limited Liability Company							
001715989	Parcel 9 Phase I LLC							
3. NAICS Code 531000	4 Brief description of the character of business conducted in Rhode Island Real Estate Investment							
5. State of Formation Rhode Island		_						
6. Principal Office Address		City	State	Zip				
230 Wyoming Avenue		Kingston	PA	18704				
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person								
Contact Name Jared Colc		Contact Title Financial Reporting and Compliance Manager						
Street Address 230 Wyoming Avenue		City Kingston	State PA	Zip 18704				
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, 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.								
Name of Authorized Person			Date	ĺ				
Patrick J Brala, Chief Financial Officer			4/13/2023					
Signature of Authorized Person								

MAIL TO:

Division of Business Services

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

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

APR 1 4 2023

FILED

FORM 632 - Revised: 2/2023