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State of Rhode Island Department of State - Business Services Division

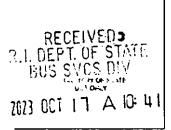
Annual Report for the year: Limited Liability Company

2022

→ 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	2. Exact name of the Limited Liability Company				
001670421	TIMCHRISNEWPORT LLC				
3. NAICS Code 531390	Brief description of the character of business conducted in Rhode Island To buy, sell and manage real estate and all activities incidental thereto.				
5. State of Formation	1				
Rhode Island					
6. Principal Office Address		City	State	Zip	
c/o Anchin, 1375 Broadway, 16th Floor		New York	NY	10018	
7. Malling Address of Limited L	lability Company and Name or Title	of Contact Person	*		
Contact Name Anchin		Contact Title			
Street Address c/o Anchin, 1375 Broadway, 16th Floor		City New York	State NY	^{Zip} 10018	
8. The Resident Agent informat	tion currently of record with the RI E	Department of State is accu	rate. Changes require	filing Form 642.	
	declare and affirm that I have eximents contained herein are true		ling any accompany	ing schedules and	
Name of Authorized Person			Date	Date	
Timothy G. Davis			9/8/2023		
Signature of Authorized Person	Timothy Davis		· •		

MAIL TO:

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED OCT 172023 10:45am BYLKS V483K