



**State of Rhode Island
Department of State - Business Services Division**

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Annual Report for the year: 2021
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 001670421		2. Exact name of the Limited Liability Company TIMCHRISNEWPORT LLC	
3. NAICS Code 531390		4. 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 Rhode Island			
6. Principal Office Address c/o Anchin, 1375 Broadway, 16th Floor		City New York	State NY
Zip 10018			
7. Mailing Address of Limited Liability 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 information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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 Timothy G. Davis		Date 9/8/2023	
Signature of Authorized Person		DocuSigned by: Timothy Davis B55295D72M3446	

FILED

OCT 17 2023 10:44 am

BY LKS V483K

MAIL TO:
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