




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 001670365		2. Exact name of the Limited Liability Company TROY CITY MORTGAGE LLC	
3. NAICS Code 522310		4. Brief description of the character of business conducted in Rhode Island MORTGAGE BROKERAGE COMPANY	
5. State of Formation MASSACHUSETTS			
6. Principal Office Address 1116 STAFFORD ROAD		City FALL RIVER	State MA
		Zip 02721	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name DAVID PEREIRA		Contact Title MANAGER	
Street Address 1116 STAFFORD ROAD		City FALL RIVER	State MA
		Zip 02721	
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 DAVID PEREIRA		Date 11/1/2023	
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

FILED

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BY *YVIG*

A.A. 2:54 pm.