

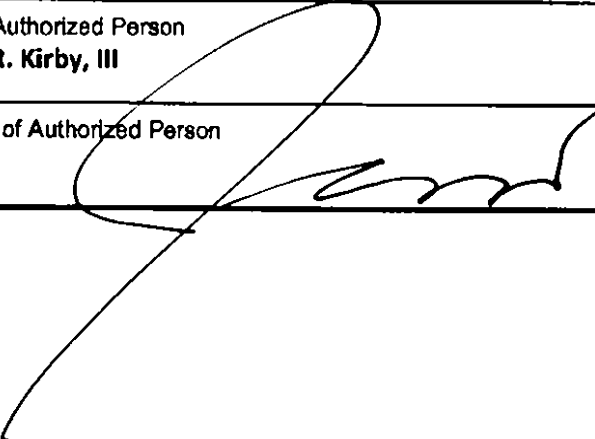


State of Rhode Island  
Department of State - Business Services Division

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Annual Report for the year: 2024  
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<br><b>001718992</b>   |  | 2. Exact name of the Limited Liability Company<br><b>Surfers Cottages, LLC</b>                                    |                    |
| 3. NAICS Code<br><b>551112</b>  |  | 4. Brief description of the character of business conducted in Rhode Island<br><b>hold and manage real estate</b> |                    |
| 5. State of Formation<br><b>RI</b>  |  |   |                    |
| 6. Principal Office Address<br><b>210 Old Airport Road</b>  |  | City<br><b>Middletown</b>   | State<br><b>RI</b> |
| Zip<br><b>02842</b>   |  |   |                    |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |  |   |                    |
| Contact Name<br><b>Jerome R. Kirby, III</b>   |  | Contact Title<br><b>Manager</b>   |                    |
| Street Address<br><b>210 Old Airport Road</b>   |  | City<br><b>Middletown</b>   | State<br><b>RI</b> |
| Zip<br><b>02842</b>   |  |   |                    |
| 8. The Resident Agent Information currently of record with the RI Department of State is accurate. Changes require filing Form 642.   |  |   |                    |
| <i>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.</i> |  |   |                    |
| Name of Authorized Person<br><b>Jerome R. Kirby, III</b>  |  |   | Date               |
| Signature of Authorized Person<br>   |  |   |                    |

MAIL TO:  
Division of Business Services  
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