RI SOS Filing Number: 202445131260 Date: 1/31/2024 4:00:00 PM



State of Rhode Island

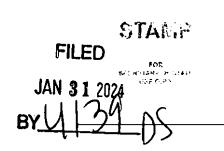
## **Department of State - Business Services Division**

## 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.



	2. Exact name of the Limited Liability Company TRAIL ASSOCIATES, LLC			
· · · · · · · · · · · · · · · · · · ·	Brief description of the character of business conducted in Rhode Island  Real estate investment			
	City East Providence	State	Zip 02915	
ed Liability Company and Name or T	itle of Contact Person	•	I	
Contact Name Gary D'Ambra		Contact Title Member		
mpanoag Trail	City East Providence	State RI	<sup>Zip</sup> 02915	
rmation currently of record with the F	RI Department of State is accurate.	Changes require	e filing Form 642.	
I declare and affirm that I have ex statements contained herein are tr	amined this report, including an	y accompanyin	g schedules and	
n		Date 1-2	3-24	
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	TRAIL ASSOCIAT  4. Brief description of the character and estate investments  Frail  Trail  T	TRAIL ASSOCIATES, LLC  4. Brief description of the character of business conducted in Rh Real estate investment  City East Providence  red Liability Company and Name or Title of Contact Person  Contact Title Member  City East Providence  Contact Title Member  City East Providence  Contact Title Member  City East Providence  Commation currently of record with the RI Department of State is accurate.  I declare and affirm that I have examined this report, including an estatements contained herein are true and correct.	TRAIL ASSOCIATES, LLC  4. Brief description of the character of business conducted in Rhode Island Real estate investment  City East Providence RI  Trail Contact Person  Contact Title Member  City East Providence  City East Providence  Contact Title Member  City East Providence  State RI  City East Providence  Contact Title Member  City East Providence  State RI  City East Providence  City East Providence	

MAIL TO:

**Division of Business Services** 

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