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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2024 **Limited Liability Company**

FEB 1 2 2024 &

→ 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 001686074	2. Exact name of the Limited Liability Company CGRI Quonset LLC			
3. NAICS Code 531110 5. State of Formation Rhode Island	4. Brief description of the character of business conducted in Rhode Island Ownership and Development of Real Estate			
6. Principal Office Address 1414 Atwood Avenue		City	State RI	Zıp 02919
7. Mailing Address of Limited L	iability Company and Name o	r Title of Contact Person		
Contact Name Kelly Coates		Contact Title Authorized Trustee		
Street Address 1414 Atwood Avenue		City Johnston	State RI	^{Zıp} 02919
8. The Resident Agent Informa	tion currently of record with th	ERI Department of State is accu	I irate. Changes require	e filing Form 642.
9. Under penalty of perjury, I statements, and that all state		ve examined this report, include true and correct.	ding any accompany	ring schedules and
Name of Authorized Person Date				
Kelly Coates			1/17/29	
Signature of Authorized Person	Thopastel	Lu. Contel		

MAIL TO:

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

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