

## 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.

1. Entity ID Number 001708332	2. Exact name of the Limited Liability Company Watson's Way, LLC			
3. NAICS Code 531390	Brief description of the character of business conducted in Rhode Island hold and manage real estate			
5. State of Formation RI				
6. Principal Office Address 180A Maxson Hill Road		City Ashaway	State RI	Zip <b>02804</b>
7. Mailing Address of Limite	d Liability Company and Name or Title	e of Contact Person		<del></del> -
Contact Name Dorothy W. Ramsay		Contact Title Manager		
Street Address 180A Maxson Hill Road		City <b>Ashaway</b>	State RI	Zip <b>02804</b>
8. The Resident Agent infon	mation currently of record with the RI	Department of State is a	ccurate. Changes requi	re filing Form 642.
	declare and affirm that I have exam atements contained herein are true		ding any accompanyi	ng schedules and
Name of Authorized Person Dorothy W. Ramsay			Date 1/24/24	
Signature of Authorized Per	yellhy)			

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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