



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.

FILED
 FEB 14 2024
 BY *PL 1293*

1. Entity ID Number 001658436		2. Exact name of the Limited Liability Company 1100 Warren Avenue, LLC		
3. NAICS Code 53 1110		4. Brief description of the character of business conducted in Rhode Island Real Estate and Rental		
5. State of Formation Rhode Island				
6. Principal Office Address 60 Colvin Street Box 357		City Hope	State RI	Zip 02831
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Anthony D. Altrui		Contact Title Manager		
Street Address 60 Colvin Street		City Hope	State RI	Zip 02831
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 Anthony D. Altrui			Date 1/15/2024	
Signature of Authorized Person <i>Anthony D Altrui</i>				

MAIL TO:
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