



State of Rhode Island
Department of State - Business Services Division

FILED FEB 14 2024
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BY DS BY DS

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 000088932		2. Exact name of the Limited Liability Company RIVERVIEW MOBILE HOME LLC	
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Mobile Home ownership	
5. State of Formation Rhode Island			
6. Principal Office Address 74 Honeyman Ave. 2 REARDON DR.		City Middletown	State RI
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Jeffrey Lemler		Contact Title MR.	
Street Address 2 Reardon Drive		City Middletown	State RI
Zip 02842			
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 Jeffrey Lemler		Date 2/8/24	
Signature of Authorized Person <i>Jeffrey Lemler</i>			

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov