



State of Rhode Island

Départment of State - Business Services Division

STAMP

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 FOR
STATE OF RHODE ISLAND
USE ONLY

FEB 14 2024

BY

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1. Entity ID Number 151247		2. Exact name of the Limited Liability Company WINDSWEPT FARM, LLC	
3. NAICS Code 115210		4. Brief description of the character of business conducted in Rhode Island Manage stable, equestrian center and provide equestrian training	
5. State of Formation RI			
6. Principal Office Address 106 Birch Swamp Road		City Warren	State RI
		Zip 02885	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Michaela Scanlon		Contact Title Member	
Street Address 106 Birch Swamp Road		City Warren	State RI
		Zip 02885	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
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 Michaela Scanlon		Date 2/6/24	
Signature of Authorized Person <i>Michaela Scanlon</i>			

MAIL TO:

Division of Business Services

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