RI SOS Filing Number: 202446897110 Date: 2/20/2024 4:00:00 PM

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## State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: 2024

FILED FEB 20 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.

2. Exact name of the Limited Lia	ability Company			
Mutual Properties Apple Valley LLC.				
4. Brief description of the character of business conducted in Rhode Island				
Real Estate				
7				
	City	State	Zip	
Highway Suite 200	West Warwick	RI	02893	
Liability Company and Name or Title	of Contact Person			
Soscia	Contact Title Managing Member		•	
Street Address One James P. Murphy Hwy Suite 200		State	<sup>Zip</sup> 02893	
ation currently of record with the RI (	Department of State is accurat	e. Changes requir	e filing Form 642.	
I declare and affirm that I have ex ements contained herein are true	amined this report, including and correct.	g any accompany	ring schedules and	
-		Date	Date	
Stephen G. Soscia Managing Member		2.72024		
	Autual Properties Ap  4. Brief description of the character Real Estate  Highway Suite 200  Liability Company and Name or Title Soscia  P. Murphy Hwy Suite 200  ation currently of record with the RI I declare and affirm that I have extended to the solution are true.	4. Brief description of the character of business conducted in I Real Estate  City West Warwick  Liability Company and Name or Title of Contact Person  Contact Title Managing M  P. Murphy Hwy Suite 200  City West Warwick  City City City West Warwick  City City City City City City City Cit	Mutual Properties Apple Valley LLC.  4. Brief description of the character of business conducted in Rhode Island Real Estate  City State RI  Highway Suite 200 West Warwick RI  Liability Company and Name or Title of Contact Person  Contact Title Managing Member  P. Murphy Hwy Suite 200 City West Warwick State RI  ation currently of record with the RI Department of State is accurate. Changes required the contained herein are true and correct.  Date	

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

Signature of Authorized Person