

State of Rhode Island

Department of State - Business Services Division

STA FEB 2 2 2024

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Annual Report for the year:
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.

Entity ID Number	2. Exact name of the Limited Liability Company			
001756977	Great Farm LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
541370 5. State of Formation	Surveying + Mapping			
RI				
6. Principal Office Address		City	State	Zip
P.O. Rw 243		Lincoln	RI	02865
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
Stephen Long		President		
Street Address		City	State	Zιρ
PO.Box 293		Lincoln	RI	02865
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		,	Date	
Stephen Long		2-17-24		
Signature of Authorized Person				
Stephin Fr				
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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