

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.

Section 1981
FE3 2 2 2024
275 0
2 B

1 Entity ID Number	2. Exact name of the Limited Liability Company				
000161541	Preferred Desica Resource 110				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
524113 5 State of Formation	insurance	-			
BI		· • · · · · · · · · · · · · · · · · · ·			
6. Principal Office Address		City	State	Zip 🔭	
507 NAMIBUIL MINE		WAKWICK	RI	02888	
7. Mailing Address of Limited Lia	ability Company and Name or Titl	e of Contact Person			
Contact Name		Contact Title			
STEWN L. CALC	iuxll	CONCK			
Street Address		City	State	Zip	
507 WAMOUNDA.		WARWICK	BI	02888	
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		
STEVEN L. CALCIWOLL			2-20-2004		
Signalure of Authorized Person (Included the Control of the Contr					

MAIL TO:

Division of Business Services

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

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