	State of Office of the	Rhode Islan Secretary of		Fee: \$50.00
		Business Serv	ices	
148 W. River Street Providence RI 02904-2615				
1636		222-3040	15	
Limited Liability Annual Report Filing Period: Febr				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024				
1. ID No. <u>000</u>	121972			
2. Exact Name of the Limited Liability Company <u>BROUILLETTE REALTY, LLC</u>				
3. State of Forma	ation			
State: <u>RI</u>				
NAICS CODE				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>531110</u>				
4. Brief Description	on of the Character of the Busir	ess Which is	Actually Condu	ucted in Rhode
OWNING AND MANAGING RENTAL REAL ESTATE				
5. Principal Offic	e Address			
No. and Street:	48 BARRINGTON AVE			
City or Town:	BARRINGTON	State: <u>RI</u>	Zip: <u>02806</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: <u>A</u> No. and Street:		e: <u>MEMBER</u>		
City or Town:	<u>48 BARRINGTON AVE</u> BARRINGTON	State: <u>RI</u>	Zip: <u>02806</u>	Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
ANN BROUILLETTE 48 BARRINGTON AVENUE BARRINGTON , RI 02806				

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 24 Day of February, 2024 at 3:22:44 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By <u>ANN BROUILLETTE</u> Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved