



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: February 1 - May 1

*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. 001748494

2. Exact Name of the Limited Liability Company 615 Camp Dixie LLC

3. State of Formation

State: RI

**NAICS CODE**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

531110

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

THE LIMITED LIABILITY COMPANY HAS THE PURPOSE OF ENGAGING IN ANY  
LAWFUL  
BUSINESS, AND SHALL HAVE PERPETUAL EXISTENCE UNTIL DISSOLVED OR  
TERMINATED IN  
ACCORDANCE WITH RIGL 7-16, UNLESS A MORE LIMITED PURPOSE OR DURATION  
IS SET  
FORTH.

5. Principal Office Address

No. and Street: 615 CAMP DIXIE ROAD

City or Town: PASCOAG

State: RI Zip: 02859 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 536 OUTRIGGER LANE

City or Town: LONGBOAT KEY

State: FL

Zip: 34228

Country: USA

**7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

KEVIN A. MULKERN 615 CAMP DIXIE ROAD PASCOAG , RI 02859

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

**Signed this 27 Day of February, 2024 at 2:09:20 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 KEVIN MULKERN

Signature of Authorized Person

Form No. 632  
Revised 09/07

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