RI SOS Filing Number: 202447487680 Date: 2/26/2024 4:00:00 PM



## State of Rhode Island

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

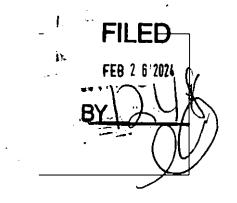
Annual Report for the year: Limited Liability Company

2024

→ 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  |                                |                      |                      |  |
|--|--|--------------------------------|----------------------|----------------------|--|
| 101423   | The John A. Caruso Family Limited Liability Company  |                                |                      |                      |  |
| 3 NAICS Code<br>531120   | Brief description of the character of business conducted in Rhode Island     Rental Property |                                |                      |                      |  |
| 5. State of Formation RI   |  |                                |                      |                      |  |
| Principal Office Address   | 1  | City                           | State                | Zıp                  |  |
| 627 Warwick Avenue   |  | Warwick                        | RI                   | 02888                |  |
| 7 Mailing Address of Limited Lia                                   | bility Company and Name or Tit   | le of Contact Person           |                      |                      |  |
| Contact Name Doreen K. Caruso                                      |  | Contact Title Managing Partner |                      |                      |  |
| Street Address 627 Warwick Avenue                                  |  | City Warwick                   | State RI             | <sup>Zip</sup> 02888 |  |
| 8. The Resident Agent information                                  | on currently of record with the RI   | Department of State is accur   | ate. Changes require | filing Form 642      |  |
| 9 Under penalty of perjury, I o<br>statements, and that all states |  | •                              | ing any accompanyi   | ng schedules and     |  |
| Name of Authorized Person  |  |                                | Date                 | Date                 |  |
| Doreen K. Caruso   |  |                                | February 22, 2024    |                      |  |
| Signature of Authorized Person                                     | K Com  |                                | ,                    |                      |  |

MAIL TO:

**Division of Business Services** 

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

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