

## State of Rhode Island

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

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.

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1. Entity ID Number	2 Exact name of the Limited L	2. Exact name of the Limited Liability Company				
-	<u> </u>					
001656916	WJD Realty, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531390	Real Estate					
5. State of Formation						
RHODE ISLAND						
6. Principal Office Address		City	State	Zip		
1 River View Road		Narragansett	RI	02882		
7. Mailing Address of Limite	d Liability Company and Name or Tit	le of Contact Person		<del></del>		
Contact Name WARREN DICLEMENTE		Contact Title  MEMBER				
Street Address 1 River View Road		City Narragansett	State RI	<sup>Zip</sup> 02882		
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.						
	y, I declare and affirm that I have e atements contained herein are tru		g any accompan	ing schedules and		
Name of Authorized Person		2	Date /			
WARREN DICLEME	NTE //	<i></i>	2/0	26/24		
Signature of Authorized Per	on i Cowent		<del>- • • • • • • • • • • • • • • • • • • •</del>			

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**MAIL TO:** 

**Division of Business Services** 

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