State of Rhode Island
Department of State - Business Services Division

FILED
MAR 0 8 2024
BY

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.

1. Entity ID Number	2. Exact name of the Limited Liability Company		
001745157	Vast Team Realty, LLC		
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island		
531110	Real Estate Rental		
5. State of Formation			
RI			
6. Principal Office Address	City	State	Zip
73 Peeptoad Road	North Scituate	RI	02857
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name William Frederickson	Contact Title Sole Member		
Street Address 73 Peep Toad Road	City North Scituate	State RI	Zip 02857
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
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	
William Frederickson		02/27/24	
Signature of Authorized Person			
X			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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1. Entity ID Number	2. Exact name of the Limited Liability Company
000143570	FLORI'S TREASURES, LLC
3. NAICS Code: 453998	4. Brief description of the character of business conducted in Rhode Island: ART GLASS, LAMPS, JEWELRY AND GIFTS
5. State of Formation: RI	

6. Principal Office Address	City	State	Zip
45 CANDLEWOOD DRIVE	NORTH KINGSTOWN	RI	02852

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

Contact Name	Contact Title
BRIAN NELSON	PRESIDENT

Street Address	City	State	Zip
45 CANDLEWOOD DRIVE	NORTH KINGSTOWN	RI	02852

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
BRIAN K. NELSON	3/5/24

Signature of Authorized Person: Brian K. Nelson

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1. Entity ID Number	2. Exact name of the Limited Liability Company
000534265	FNB PROPERTIES, LLC
3. NAICS Code: 531120	4. Brief description of the character of business conducted in Rhode Island: PROPERTY HOLDING COMPANY
5. State of Formation: RI	

6. Principal Office Address	City	State	Zip
45 CANDLEWOOD DRIVE	NORTH KINGSTOWN	RI	02852

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

Contact Name	Contact Title
BRIAN NELSON	PRESIDENT

Street Address	City	State	Zip
45 CANDLEWOOD DRIVE	NORTH KINGSTOWN	RI	02852

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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
BRIAN K NELSON	3/5/24

Signature of Authorized Person: Brian K Nelson

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