

State of Rhode Island **Department of State - Business Services Division**

2024

Annual Report for the year: **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			
1757358	Keystone Management LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
531390	Real Estate.			
5. State of Formation	property management			
RJ	' ' '			
6. Principal Office Address	,	City	State	Zip
83 dallup St		Providence	RI	02.905
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
Johnny Phillips		Owner	**=	
Street Address		City	State	Zip
83 Gallyest		Owner City Providence	RI	02905
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	
Johnny Phillips			3/15/24	
Signature of Authorized Person				
lar Vans				
7/				

FILED

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MAIL TO:

Division of Business Services

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