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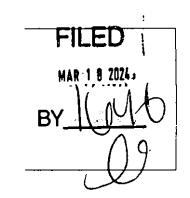
## State of Rhode Island Department of State - Business Services Division

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				
00549921	Rosewood Assoicates, LLC				
3. NAICS Code 531311	Brief description of the character of business conducted in Rhode Island     Invest and manage real estate				
5. State of Formation					
Rhode Island					
6. Principal Office Address	·· · · · · · · · · · · · · · · · · · ·	City	State	Zip	
1 Park Row 5th Floor		Providence	RI	02903	
7. Mailing Address of Limited	Liability Company and Name	or Title of Contact Person		<u>-</u>	
Contact Name Ed Galvin		Contact Title CPA			
Street Address 1 Park Row 5th Floor		City Providence	State RI	<sup>Zip</sup> 02903	
8. The Resident Agent inform	nation currently of record with t	he RI Department of State is accur	ate. Changes requir	e filing Form 642.	
9. Under penalty of perjury statements, and that all sta	, I declare and affirm that I hat the tempets contained herein a	ave examined this report, includi re true and correct.	ng any accompany	ring schedules and	
Name of Authorized Person	<u> </u>	<del></del>	Date		
Paul C. Jankowski // //			3/12/24		
Signature of Authorized Person	orl				

MAIL TO:

**Division of Business Services** 

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

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