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## State of Rhode Island

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

| Annual  | Report  | for the | e year: | 2 |
|---------|---------|---------|---------|---|
| Partner | ehin (l | PIIP    | LLIDY   | _ |

2024

→ 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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|                                                                                                                                                                                                                           |                                                                          |  |            | $\sim$ |       |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--|------------|--------|-------|--|--|
| Entity ID Number                                                                                                                                                                                                          | 2. Exact Name of the Partnership                                         |  |            |        |       |  |  |
| 97517                                                                                                                                                                                                                     | New Redwood Associates Limited Partnership                               |  |            |        |       |  |  |
| 3. NAICS Code                                                                                                                                                                                                             | Brief description of the character of business conducted in Rhode Island |  |            |        |       |  |  |
| 531390                                                                                                                                                                                                                    |                                                                          |  |            |        |       |  |  |
| 5. State of Formation                                                                                                                                                                                                     | Acquire entity and/or various other interests                            |  |            |        |       |  |  |
| Rhode Island                                                                                                                                                                                                              |                                                                          |  |            |        |       |  |  |
| 6. Principal Office Address                                                                                                                                                                                               |                                                                          |  | City       | State  | Zip   |  |  |
| 5 Cathedral Square                                                                                                                                                                                                        |                                                                          |  | Providence | RI     | 02903 |  |  |
| 7. The name and business address of each general partner or one or more partner(s):  LP and LLLP only: an amendment is required to record a change in general partner(s) - use Form 301 (domestic) or Form 351 (foreign). |                                                                          |  |            |        |       |  |  |
| PARTNER                                                                                                                                                                                                                   | BUSINESS ADDRESS                                                         |  |            |        |       |  |  |
| Affordable Housing Strate                                                                                                                                                                                                 | 5 Cathedral Square, Providence, RI 02903                                 |  |            |        |       |  |  |
|                                                                                                                                                                                                                           |                                                                          |  |            |        |       |  |  |
|                                                                                                                                                                                                                           |                                                                          |  |            |        |       |  |  |
|                                                                                                                                                                                                                           |                                                                          |  |            |        |       |  |  |
| 8. Under penalty of perjury, I declare and affirm that I have examined this report, and that all statements contained herein are true and correct.                                                                        |                                                                          |  |            |        |       |  |  |
| Name of General Partner or Authorized Representative Date                                                                                                                                                                 |                                                                          |  |            |        |       |  |  |
| SEE ATTACHED SIGNATURE BLOCK 3/15/24                                                                                                                                                                                      |                                                                          |  |            |        |       |  |  |
| Signature of General Partner or Authorized Representative                                                                                                                                                                 |                                                                          |  |            |        |       |  |  |

MAIL TO:

**Division of Business Services** 

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

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



## Signature page to 2024 Annual Report for New Redwood Associates Limited Partnership Entity ID# 97517

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MAR 15 2024

New Redwood Associates Limited Partnership

By: Affordable Housing Strategies, Inc.

Its: General Partner

By: Scott Gaudreau

Its: Vice President/ Treasurer

3/15/24