

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.

FILED MAR 19 2024

1. Entity ID Number	2. Exact name of the Limited Liability Company			
1761708	Reservoir House,	Reservoir House, LLC		
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
531120	To hold and manage	To hold and manage properties		
5. State of Formation				
RI				
6. Principal Office Address		City	State	Zip
21 Willard Avenue		Rehoboth	MA	02769
7. Mailing Address of Limite	d Liability Company and Name o	r Title of Contact Person		
Contact Name Benjamin A. Morgan-Dillon		Contact Title Member		
Street Address 21 Willard Avenue		City Rehoboth	State MA	^{Zip} 02769
8. The Resident Agent infor	mation currently of record with th	e RI Department of State is accu	rate. Changes require	filing Form 642.
	y, I declare and affirm that I ha tatements contained herein are	•	ling any accompany	ing schedules and
Name of Authorized Person			Date	
Benjamin A. Morgan-Dillon			3//3	124
Signature of Authorized Per	rson			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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