RI SOS Filing Number: 202449932070 Date: 4/1/2024 4:00:00 PM



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.



1 Entity ID Number	2. Exact name of the Limited Liability Company				
93904	VILLAGE RETIREMENT COMMUNITIES, L.L.C.				
3 NAICS Code	4 Brief description of the character of business conducted in Rhode Island				
621491	To develop a fram	To develop a framework for joint development, operation and management			
5 State of Formation	of assisted care fa	of assisted care facilities			
Rhode Island					
6. Principal Office Address		City	State	Zıp	
715 Putnam Pike		Greenville	RI	02828	
7. Mailing Address of Limite	ed Liability Company and Name	or Title of Contact Person			
Contact Name Jessica Frisone		Contact Title			
Street Address 715 Putnam Pike		City Greenville	State RI	^{Zip} 02828	
8. The Resident Agent info	mation currently of record with	the RI Department of State is accur	rate. Changes require	e filing Form 642.	
9 Under penalty of perjui statements, and that all s	ry, I declare and affirm that I I tatements contained herein a	nave examined this report, includ are true and correct.	ing any accompany	ring schedules and	
Name of Authorized Person			Date		
Jasen Crozier			3.7-24		
Signature of Authorized Pe	rson		•	,	

MAIL TO:

Division of Business Services

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

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