

## 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.

Entity ID Number	2. Exact name of the Limited Liability Company Forty Nine Sakonnet LLC  4. Brief description of the character of business conducted in Rhode Island Rental and Leasing of Residential Property			
001731798				
3. NAICS Code 531110 5. State of Formation				
Florida				
6. Principal Office Address		City	State	Zip
453 Pinewood Lake Drive		Venice	FL	34285
7. Mailing Address of Limite	d Liability Company and Name o	or Title of Contact Person		
Contact Name Eric Bisighini		Contact Title Chief Financial Officer		
Street Address 453 Pinewood Lake Drive		City Venice	State	<sup>Zip</sup> 34285
8. The Resident Agent infor	mation currently of record with th	ne RI Department of State is acc	urate. Changes requi	re filing Form 642.
	y, I declare and affirm that I ha tatements contained herein an		iding any accompan	ying schedules and
Name of Authorized Person			Date	
Eric Bisighini		02/29/2024		
Signature of Authorized Per	son Ein Biog	Anim & Chief Fire	ancial Office	er

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BY K3TØB

MAIL TO:

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

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