



State of Rhode Island
Department of State - Business Services Division

RECEIVED
24 APR 2024
PM 12:11:11
Stamp

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 000795633		2. Exact name of the Limited Liability Company Wilder Therapy and Wellness, LLC	
3. NAICS Code 621112		4. Brief description of the character of business conducted in Rhode Island individual therapy, couples counseling, diagnostic and academic assessment, and consultation	
5. State of Formation RI			
6. Principal Office Address 535 Centerville Road, Suite 302A		City Warwick	State RI Zip 02886
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Jami Wilder, PsyD		Contact Title Authorized Person	
Street Address 535 Centerville Road, Suite 302A		City Warwick	State RI Zip 02886
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
<i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i>			
Name of Authorized Person Jami Wilder, PsyD		Date 3/19/24	
Signature of Authorized Person 			

FILED

APR 2 2024

BY 2024
for

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov