



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

APR 18 2024

BY

1013
[Signature]

1. Entity ID Number <u>001757669</u>		2. Exact name of the Limited Liability Company <u>Southeast Sights LLC</u>	
3. NAICS Code <u>531390</u>		4. Brief description of the character of business conducted in Rhode Island <u>short term rental of summer home</u>	
5. State of Formation <u>R.I.</u>			
6. Principal Office Address <u>108 Old Jewett City Rd</u>		City <u>Preston</u>	State <u>CT</u>
Zip <u>06365</u>			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Jennifer Crary</u>		Contact Title	
Street Address <u>108 Old Jewett City Rd</u>		City <u>Preston</u>	State <u>CT</u>
Zip <u>06365</u>			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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.			
Name of Authorized Person <u>Jennifer Crary</u>		Date <u>4-15-24</u>	
Signature of Authorized Person <i>Jennifer Crary</i>			

MAIL TO:

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