

## State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year: Limited Liability Company

2024

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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.PR 22 <sub>.53</sub> 2:27:18	L

Entity ID Number	2. Exact name of the Lir	2. Exact name of the Limited Liability Company				
000106949	MAR-AL REAL	MAR-AL REALTY, L.L.C.				
3. NAICS Code	4. Brief description of th	4. Brief description of the character of business conducted in Rhode Island				
531390	To engage in the	To engage in the business of holding real estate.				
5 State of Formation						
Rhode Island						
6. Principal Office Address		City	State	Zip		
306 Town Farm Roa	d	Coventry RI 028 <sup>-1</sup>		02816		
7 Mailing Address of Limite	ed Liability Company and Nam	e or Title of Contact Person				
Contact Name Charles D	. Anthony	Contact Title Manager				
Street Address 306 Town Farm Road		City Coventry	State RI	<sup>Z<sub>ip</sub></sup> 02816		
8. The Resident Agent info	rmation currently of record with	the RI Department of State is acc	curate. Changes requir	e filing Form 642		
	ry, I declare and affirm that I tatements contained herein	have examined this report, incluare true and correct.	iding any accompan	ying schedules and		
Name of Authorized Person			Date			
Charles D. Anthony,	Manager					
Signature of Authorized Pe	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 727 YFILED

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