	State of F Office of the S	Rhode Islan Secretary of		Fee: \$50.00
	Division Of I	Business Serv	rices	
148 W. River Street				
Providence RI 02904-2615 (401) 222-3040				
1030		222-3040		
Limited Liability	Company			
Annual Report Filing Period: Febr	uary 1 - May 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024				
1. ID No. <u>000812264</u>				
2. Exact Name of the Limited Liability Company <u>3 LAKE CREST DRIVE, LLC</u>				
3. State of Formation				
State: <u>RI</u>				
NAICS CODE				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>531390</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
REAL ESTATE HOLDING COMPANY				
5. Principal Offic	e Address			
No. and Street:	39 WOODS WAY			
City or Town:	NORTH KINGSTOWN	State: <u>RI</u>	Zip: <u>02852</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: C				
No. and Street:	39 WOODS WAY			
City or Town:	NORTH KINGSTOWN	State: <u>RI</u>	Zip: <u>02852</u>	Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
MICHAEL V. FERRI 1725 PONTIAC AVE. CRANSTON , RI 02920				

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 30 Day of April, 2024 at 10:29:29 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>BEVERLY CASINELLI</u> Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved