



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 30 2024

BY [Signature]

1. Entity ID Number 000790647		2. Exact name of the Limited Liability Company EXTENSION PROPERTIES, LLC	
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island Rental of real property.	
5. State of Formation Rhode Island			
6. Principal Office Address 15 Extension 184		City Ashaway	State RI
		Zip 02804	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Nancy Greene		Contact Title	
Street Address 15 Extension 184		City Ashaway	State RI
		Zip 02804	
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 Nancy E Greene		Date 04/25/2023	
Signature of Authorized Person Nancy E Greene			

MAIL TO:

Division of Business Services

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