



**State of Rhode Island  
Department of State - Business Services Division**

**FILED**  
MAY 01 2024  
BY [Signature]

**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 001751037		2. Exact name of the Limited Liability Company Mowry Apartments, LLC	
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island Real estate and any other lawful purpose.	
5. State of Formation Rhode Island			
6. Principal Office Address 10 Compass Point Drive		City Douglas	State MA
Zip 01516			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Rebecca DeCicco		Contact Title Sole Member	
Street Address 10 Compass Point Drive		City Douglas	State MA
Zip 01516			
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>Rebecca DeCicco</u>			Date <u>4/24/24</u>
Signature of Authorized Person <u>[Signature]</u>			

**MAIL TO:**  
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