



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.

1. Entity ID Number 001673920		2. Exact name of the Limited Liability Company 15 Lovegreen, LLC	
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island own real estate	
5. State of Formation Rhode Island			
6. Principal Office Address 15 Lovegreen Lane		City East Greenwich	State RI
			Zip 02818
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Keith O. Monchik		Contact Title Member	
Street Address 15 Lovegreen Lane		City East Greenwich	State RI
			Zip 02818
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 Keith O. Monchik			Date 4/3/24
Signature of Authorized Person 			

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**MAIL TO:**

Division of Business Services  
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