

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.

MAY 01 2024

BY 4 3905

1. Entity ID Number 000541906	2. Exact name of the Limited Liability Company Summerwind1, LLC 4. Brief description of the character of business conducted in Rhode Island Own and manage real estate			
3. NAICS Code 531311				
5. State of Formation Rhode Island				
6. Principal Office Address 7171 N. Federal Highway		City Boca Raton	State FL	Zip 33487
7. Mailing Address of Limite	d Liability Company and Nam	e or Title of Contact Person		
Contact Name Charles G. Ged, Trustee		Contact Title Authorized Signor		
Street Address 7171 N. Federal Highway		Gity Boca Raton	State FL	Zip 33487
8. The Resident Agent infor	mation currently of record with	the RI Department of State is accu	ırate. Changes requir	e filing Form 642.
Under penalty of perjury, statements, and that all s	l declare and affirm that I ha tatements contained herein	ve examined this report, including are true and correct.	g any accompanyin	g schedules and
Name of Authorized Person			Date //	notall
Charles G. Ged			7/	65/29
Signature of Authorized/Por	rson		7	-

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov