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State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 2024
Partnership (LP, LLP, LLLP)

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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MA	Y 0 8 2021	,
BY_	31/2) _

1. Entity ID Number	2. Exact Name of the Partnership					
876742	Ashton Village L.P.					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
531110	To act as a general partner of a limited partner which develops affordable housing.					
5. State of Formation	anordable nousing.					
RI				\		
6. Principal Office Address			City	State	Zip	
1029 Mendon Road			Cumberland	RI	02864	
7. The name and business addr LP and LLLP only: an amendment i	ess of each geni is required to reco	eral partner or or ord a change in gen	ne or more partner(s): eral partner(s) - use Form	301 (domestic) or Form 3	351 (foreign).	
PARTNER BUSIN			USINESS ADDRESS			
Ashton Village Developm	1029 Mendon Road, Cumberland, RI 02864					
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				<u> </u>		
Under penalty of perjury, I de and correct.	clare and affirm	L that I have exam	ined this report, and the	nt all statements contain	ned herein are true	
Name of General Partner or Authorized Representative					Date	
Jeffrey G. Swanson	3/22/2024	3/22/2024				
Signalure of General Partner	or Authorized Re	epresentative				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

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