

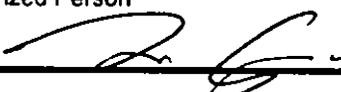


**State of Rhode Island
Department of State - Business Services Division**

REC'D RIDOS BSD
MAY 29 AM 3:39:42

Annual Report for the year: 2021
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 001693442 | | 2. Exact name of the Limited Liability Company West River Estates LLC | |
| 3. NAICS Code 531390 | | 4. Brief description of the character of business conducted in Rhode Island Real Estate evaluation / Development | |
| 5. State of Formation RI | | | |
| 6. Principal Office Address 1 Calcagni Place | | City Greenville | State RI |
| Zip 02828 | | | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name Louis Calcagni | | Contact Title Owner | |
| Street Address 1 Calcagni Place | | City Greenville | State RI |
| Zip 02828 | | | |
| 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 Louis Calcagni | | | Date 5/28/24 |
| Signature of Authorized Person  | | | |

FILED 841

MAY 29 2024

BY 72844
RS

MAIL TO:
Division of Business Services
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Phone: (401) 222-3040
Website: www.sos.ri.gov