



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.

✓

**STAMP
FILED**

JUN 12 2024

BY *[Signature]*

1. Entity ID Number 001675046	2. Exact name of the Limited Liability Company FIVE TWENTY FIVE, LLC		
3. NAICS Code 789331	4. Brief description of the character of business conducted in Rhode Island Real Estate ownership and management		
5. State of Formation RI			
6. Principal Office Address 1239 Hartford Avenue, Sute 1	City Johnston	State RI	Zip 02919
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Albert J. Marano		Contact Title	
Street Address 1239 Hartford Avenue, Suite 1	City Johnston	State RI	Zip 02919
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. <i>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.</i>			
Name of Authorized Person Albert J. Marano		Date ✓ 5-26-24	
Signature of Authorized Person ✓ <i>[Signature]</i>			

MAIL TO:
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