

State of Rhode Island Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2024

→ 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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Entity ID Number	2. Exact name of the Limit	2. Exact name of the Limited Liability Company			
001761919	Trident Home Loans, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
522310	Residential Mortgag	Residential Mortgage Loan Origination			
5. State of Formation					
Florida					
6. Principal Office Address		City	State	Zip	
6723 Plantation Road		Pensacola	FL	32504	
7. Mailing Address of Limite	d Liability Company and Name o	r Title of Contact Person	<u>, </u>	1	
Contact Name Tim Moor		Ceo / CFO			
Street Address 6723 Plantation Road		City Pensacola	State FL	^{Zip} 32504	
8. The Resident Agent infor	nation currently of record with the	e RI Department of State is accur	ate. Changes require	e filing Form 642.	
	/, I declare and affirm that I hav atements contained herein are	ve examined this report, includi true and correct.	ng any accompany	ring schedules and	
Name of Authorized Person			Date		
Tim Moor			07/30/2024		
Signature of Authorized Per-	son		•		
I'm les	って				

MAIL TO:

Division of Business Services

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