RI SOS Filing Number: 202460246620 Date: 9/20/2024 11:44:00 AM

State of Rhode Islandary Department of S		REC CORETAI Services Division OR	EIVOO RY (Former ATIC TA		
Annual Report for the year:	2024	and Sep -	9 5 1:40	STAMP	
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.				SPURE STATE OF STATE	
1. Entity ID Number	2. Exact name of the Limited Liability Company				
1678925	The Livingston Family LLC				
3. NAICS Code 531190	4. Brief description of the character of business conducted in Rhode Island Hold, manage and develop real estate				
5. State of Formation RI					
6. Principal Office Address	. <u> </u>	City	State	Zip	
55 Ferry Road		Bristol	RI	02809	
7. Mailing Address of Limited Lia	bility Company and Nar	me or Title of Contact Person			
Contact Name Frederick C Livingston		Contact Title Mer	Contact Title Member		
Street Address PO Box 11		City Bristol	State R	Zip 02809	
8. The Resident Agent information					
 Under penalty of perjury, I d statements, and that all staten 	eclare and affirm that : ents contained herein	I have examined this report a are true and correct.	, including any accom	panying schedules and	
Name of Authorized Person Date / /					
Frederick C Livingston 9/6/2024					
Signature of Authorized Person Walled Winter					

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode (sland 02904-2615)

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

SEP 2 0 2024

FORM 632 - Revised: 12/2023