

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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1. Entity ID Number	2. Exact name of the Limited Liability Company				
00172 6332	Churatill	Redity UC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
631110	Real Estate				
5. State of Formation	real estate				
DE					
6. Principal Office Address		City	State	Zip	
33 Willia	um St	Newport	RE	02840	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Monica Barrett		Contact Title Mundary			
Street Address 33 Will	iam St	City Newport	State	2ip 02840	
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	Monica Barrett		Date 10 / 12/24		
Signature of Authorized Person					

FILED

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ENVÍE POR CORREO POSTAL A:

Business Services Division

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