RI SOS Filing Number: 202460627230 Date: 10/15/2024 12:22:00 PM



## State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year: Limited Liability Company

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→ 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				
001726332	Churchill Reality UC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
631110	Real Estate				
5. State of Formation	pear correc				
DE					
6. Principal Office Address		City	State Zip		
33 William	St	Newport	PI 02840		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Morrisa Barrett		Contact Title  Mumber			
Street Address 33 William St		City Newport	State Zip Ozfyo		
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 March Barrett		Date /0/12/24			
Signature of Authorized Person What .					

HA

FILED

OCT 15 2024 BY 43 CBF

13:33pm

**ENVÍE POR CORREO POSTAL A:** 

**Business Services Division** 

148 W. River Street, Providence, Rhode Island 02904-2615

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