CAS

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

Annual Report for the year: 2025 **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.

1. Entity ID Number	2. Exact name of the Limited Liability Company				
793927	Stumpy Point, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island     HOLDS TITLE TO, MANAGES AND PAYS THE EXPENSES FOR LOT 15,				
531311					
5. State of Formation	TAX MAP 7 IN THE TOWN OF CHARLESTOWN, RI				
Rhode Island					
6. Principal Office Address		City	State	Zip	
27 Stumpy Point Lane		Charlestown	RI	02813	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
Richard J. Land, Esq.		Temporary Administrator for the Estate of Walter B Marsony. TIL			
Street Address 27 Stumpy Point Lane		Charlestown	State RI	<sup>zip</sup> 02813	
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			Date		
Richard Land, Esq.			1/7/25		
Signature of Authorized Person					
M 7 7 TEMP. ADMIN.					

RI DOS MADE NON-SUBSTANTIVE EDITS

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

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