

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

RECD RIDGS 850 25 Jan 9 M3:47:3:

Annual Report for the year: 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			
001099553	LIST Properties LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
531110	Real Estate Purches, SHE, Management			
5. State of Formation	Mean Co.		,	U
RI				
6. Principal Office Address		City	State	Zip
25 Intervale	KR	East Providence	RI	02914
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
LEFAN ST. JOHN		OWNER		
25 Intervale	Ave	Enst Providence	State RI	2ip 09914
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 / 2	
LEFAN ST. JOHN			1/9/	125
Signature of Authorized Person Julian St. Hum				

FILED 9:47

JAN 0 9 2025

BY JCBRY

(B)

MAIL TO:

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

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