



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025

1. ID No. 001779715

2. Exact Name of the Limited Liability Company GOVERNOR FRANCIS INN RESTAURANT LLC

3. State of Formation

State: RI

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

722511

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

THE BUSINESS CONDUCTED IN RHODE ISLAND IS A FULL-SERVICE RESTAURANT OFFERING

A DIVERSE MENU OF HIGH-QUALITY FOOD AND BEVERAGES. OUR ESTABLISHMENT PROVIDES

A WELCOMING DINING EXPERIENCE, FEATURING TABLE SERVICE, A COMFORTABLE

ATMOSPHERE, AND EXCEPTIONAL CUSTOMER CARE TO CATER TO A WIDE RANGE OF

CULINARY PREFERENCES. WE AIM TO SERVE AS A GATHERING PLACE FOR THE COMMUNITY,

DELIVERING MEMORABLE MEALS AND FOSTERING POSITIVE RELATIONSHIPS WITH OUR PATRONS

5. Principal Office Address

No. and Street: 100 DANIEL BROWN DRIVE

City or Town: MYSTIC

State: CT Zip: 06355 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: GULSHAN SONI Contact Title: OWNER

No. and Street: 1251 WARWICK AVE

City or Town: WARWICK

State: RI

Zip: 02888

Country: USA

**7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

GULSHAN SONI 1251 WARWICK AVE WARWICK , RI 02889

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 10 Day of January, 2025 at 4:15:45 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By GULSHAN SONI

Signature of Authorized Person

Form No. 632
Revised 09/07

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