RI SOS Filing Number: 202562689370 Date: 1/15/2025 4:00:00 PM



State of Rhode Island Department of State - Business Services Division

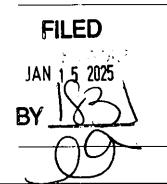
2025

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.



Entity ID Number	2. Exact name of the Limited Liability Company			
000505561	Ocean State Therapy Associates, LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
621330	Specialist in the Treatment of Addictions, Trauma and Healing			
5. State of Formation				
Rhode Island				
6. Principal Office Address		City	State	Zip
67 Cliff Drive		Bristol	RI	02809
7. Mailing Address of Limited	Liability Company and Name	or Title of Contact Person		
Contact Name Moses Calouro		Contact Title		
Street Address 67 Cliff Drive		City Bristol	State RI	^{Z₁p} 02809
8. The Resident Agent inform	nation currently of record with the	ne RI Department of State is ac	curate. Changes require	e filing Form 642.
	, I declare and affirm that I ha tements contained herein ar	eve examined this report, incl e true and correct.	uding any accompany	ring schedules and
Name of Authorized Person			Date	
Lorraine Calouro			1/13/2025	
Signature of Authorized Pers	Calous		•	

MAIL TO:

Division of Business Services

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

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

