

State of Rhode Island Department of State - Business Services Division

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			
000311882	C.R.S. Management, LLC			
3. NAICS Code 53	Brief description of the character of business conducted in Rhode Island Management of real estate			
5. State of Formation RI				
6. Principal Office Address		City	State	Zip
786 Oaklawn Avenue		Cranston	RI	02920
7. Mailing Address of Limite	d Liability Company and Name or	Title of Contact Person		
Contact Name Carlene DelNero		Contact Title President		
Street Address 786 Oaklawn Ave		City Cranston	State RI	^{Zip} 02920
8. The Resident Agent infon	nation currently of record with the	RI Department of State is accu	rate. Changes require	e filing Form 642.
9. Under penalty of perjury	r, I declare and affirm that I have atements contained herein are	e examined this report, include		
Name of Authorized Person			Date	
Carlene DelNero			1-9-25	
Signature of Apthorized Pen	Son Luller		<u> </u>	· · · · · · · · · · · · · · · · · · ·

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

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