



**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.

**FILED**  
**JAN 21 2025**  
 BY 1001  
EG

|                                                                                                                                                                                                             |  |                                                                                                                                                                                |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| 1. Entity ID Number<br><b>001780182</b>                                                                                                                                                                     |  | 2. Exact name of the Limited Liability Company<br><b>MacInsights, LLC</b>                                                                                                      |                        |
| 3. NAICS Code<br><b>541618</b>                                                                                                                                                                              |  | 4. Brief description of the character of business conducted in Rhode Island<br><b>Advisory and consulting services, all ancillary purposes, and all other lawful purposes.</b> |                        |
| 5. State of Formation<br><b>RI</b>                                                                                                                                                                          |  |                                                                                                                                                                                |                        |
| 6. Principal Office Address<br><b>335 Moosehorn Road</b>                                                                                                                                                    |  | City<br><b>East Greenwich</b>                                                                                                                                                  | State<br><b>RI</b>     |
| Zip<br><b>02818</b>                                                                                                                                                                                         |  |                                                                                                                                                                                |                        |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person                                                                                                                         |  |                                                                                                                                                                                |                        |
| Contact Name<br><b>Mary A. MacIntosh</b>                                                                                                                                                                    |  | Contact Title<br><b>Manager</b>                                                                                                                                                |                        |
| Street Address<br><b>335 Moosehorn Road</b>                                                                                                                                                                 |  | City<br><b>East Greenwich</b>                                                                                                                                                  | State<br><b>RI</b>     |
| Zip<br><b>02818</b>                                                                                                                                                                                         |  |                                                                                                                                                                                |                        |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.                                                                         |  |                                                                                                                                                                                |                        |
| <i>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.</i> |  |                                                                                                                                                                                |                        |
| Name of Authorized Person<br><b>Mary A. MacIntosh</b>                                                                                                                                                       |  |                                                                                                                                                                                | Date<br><b>1/16/25</b> |
| Signature of Authorized Person                                                                                           |  |                                                                                                                                                                                |                        |

**MAIL TO:**

**Division of Business Services**  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: [www.sos.ri.gov](http://www.sos.ri.gov)