

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

CILED

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.

| | 2. Exact name of the Limited Liability Company | | | |
|---|--|---|--|--|
| C.R.S. Maintenance, LLC 4. Brief description of the character of business conducted in Rhode Island Maintenance of real estate | | | | |
| | | | | |
| | City | State | Zip | |
| | Cranston | RI | 02920 | |
| bility Company and Name o | r Title of Contact Person | | | |
| Contact Name Carlene DelNero | | Contact Title Manager | | |
| Ave | City Cranston | State | ^{Zip} 02920 | |
| n currently of record with th | e RI Department of State is acc | rrate. Changes require | e filing Form 642. | |
| eclare and affirm that I have ents contained herein are | ve examined this report, include true and correct. | ding any accompany | ing schedules and | |
| Name of Authorized Person | | Date | | |
| Carlene DelNero | | 1-9-25 | | |
| | 4. Brief description of the of Maintenance of real bility Company and Name of the coronaction of the coronac | 4. Brief description of the character of business conducted Maintenance of real estate City Cranston bility Company and Name or Title of Contact Person Contact Title Manager Ave City Cranston Contact Title Cranston Contact Title Manager Ave City Cranston | 4. Brief description of the character of business conducted in Rhode Island Maintenance of real estate City | |

MAIL TO:

Division of Business Services

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