RI SOS Filing Number: 202564570540 Date: 2/7/2025 4:00:00 PM



State of Rhode Island Department of State - Business Services Division

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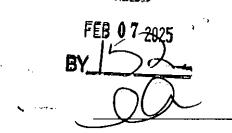
Annual Report for the year: Limited Liability Company

2025

→ 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	Exact name of the Limited Liabi	Exact name of the Limited Liability Company			
000147064	FDEP Realty ,LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
621111	Family Medicine Practice				
5. State of Formation					
Rhode Island					
6. Principal Office Address		City	State	Zip	
1445 Wampanoag Trail		East Providence	RI	02915	
7. Mailing Address of Limite	d Liability Company and Name or Title of	Contact Person	- I		
Contact Name Joyce Alves		Contact Title Managing Partner			
Street Address 214 South Hull Street		East Providence	State RI	^{Zip} 02914	
8. The Resident Agent inform	nation currently of record with the RI De	partment of State is accurate.	Changes require	filing Form 642.	
9. Under penalty of perjury statements, and that all st	r, I declare and affirm that I have exam atements contained herein are true an	nined this report, including ad correct.	апу ассотрапу	ing schedules and	
Name of Authorized Person			Date		
Joyce Alves			02-04-2025		
Signature of Authorized Per	son				
Joyce Olive	_e)				
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MAIL TO:

Division of Business Services

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

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