



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

FEB 24 2025

BY

1. Entity ID Number 001721123		2. Exact name of the Limited Liability Company 14 Village LLC	
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island Real Estate	
5. State of Formation RI			
6. Principal Office Address PO Box 72		City Marlborough	State MA
		Zip 01752	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Michael W. Miller		Contact Title Registered Agent	
Street Address 122 Touro Street		City Newport	State RI
		Zip 02840	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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.			
Name of Authorized Person PATRICIA STUCKERT		Date 02/11/2025	
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