



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.

1. Entity ID Number 796130		2. Exact name of the Limited Liability Company VAN DONGEN DDS, LLC	
3. NAICS Code 621210		4. Brief description of the character of business conducted in Rhode Island Dental Services	
5. State of Formation Rhode Island			
6. Principal Office Address 372 Ives Street		City Providence	State RI
		Zip 02906	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Craig Van Dongen, DDS		Contact Title	
Street Address 372 Ives Street		City Providence	State RI
		Zip 02906	
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 Craig Van Dongen		Date 2/13/2025	
Signature of Authorized Person <i>Craig Van Dongen DDS</i>			

FILED

FEB 24 2025



BY 7695

MAIL TO:

Division of Business Services

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