

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	2. Exact name of the Limited Liability Company				
001335539	CORMORANT CONSTRUCTION COMPANY UC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
236115	CONTRACTOR				
5. State of Formation					
RI					
6. Principal Office Address		City	State	Zip	
120 SPRUCE STREET		PROVIDENCE	121	02903	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
ANDREW CARLIN		MEMBER			
Street Address		City	State	Zip 02903	
120 SPRUCE	STREET	PROVIDENCE	721	02905	
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		· · ·	Date		
ANTOREW CARRLIN			2/25/25		
Signature of Authorized Person					

FILED

FEB 25 2025 BY 49EdZ

MAIL TO:

Division of Business Services

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

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