



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.

1. Entity ID Number 001725174		2. Exact name of the Limited Liability Company Squad 5 Family Transportation LLC	
3. NAICS Code 485 999		4. Brief description of the character of business conducted in Rhode Island Non emergency vehicle Transportation	
5. State of Formation RI			
6. Principal Office Address 15 Reynolds Ave		City North Providence	State RI
		Zip 02911	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Saintelise Sans-Souci		Contact Title Owner	
Street Address 15 Reynolds Ave		City North Providence	State RI
		Zip 02911	
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 Saintelise Sans-Souci		Date 2/26/25	
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

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FEB 26 2025
BY M1BTD
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