

State of Rhode Island

Department of State - Business Services Division

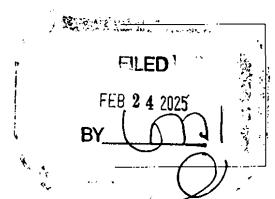
Annual Report for the year: Limited Liability Company

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 553976	Exact name of the Limited Liability Company WICKFORD VETERINARY ASSOCIATES, LLC			
3 NAICS Code 423490	4 Brief description of the cha	4 Brief description of the character of business conducted in Rhode Island Veterinary clinic		
5 State of Formation Rhode Island				
6. Principal Office Address	.	City	State	Zip
7260 Post Road		North Kingstown	RI	02852
7 Mailing Address of Limite	d Liability Company and Name or T	itle of Contact Person		
Contact Name Christina M. Lorenson		Contact Title		
Street Address 7260 Post Road		City North Kingstown	State RI	^{Zıp} 02852
8. The Resident Agent Infor	mation currently of record with the F	I Department of State is accurate.	Changes require	e filing Form 642
	y, I declare and affirm that I have latements contained herein are tr		any accompany	ving schedules and
Name of Authorized Person Christina M. Lorenso	'		Date 2-14-25	
Signature of Authorized Per	na vense	1		

MAIL TO:

Division of Business Services

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

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