	State of Rhode Island	Fee: \$50.00
	Office of the Secretary of State	Fee. \$50.00
	Division Of Business Services	
	148 W. River Street	
1636	Providence RI 02904-2615 (401) 222-3040	
Limited Liability Company Annual Report		
Filing Period: Feb	oruary 1 - May 1	
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or		
refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.		
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025		
1. ID No. <u>001772966</u>		
2. Exact Name of the Limited Liability Company <u>New Story IDS, LLC</u>		
3. State of Formation		
State: <u>DE</u>		
NAICS CODE		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.		
<u>611710</u>		
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode		
Island		
SPECIAL EDUC	CATION SERVICES	
5. Principal Offic	ce Address	
No. and Street:	2 VILLAGE SQUARE, SUITE 210	
City or Town:	BALTIMOREState: MDZip: 21210Court	ntry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
Contact Name:		
City or Town:	2 VILLAGE SQUARE, SUITE 210 BALTIMORE State: MD Zip: 21210 Cou	ntry: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11		
CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST		

PROVIDENCE, RI 02914

## 8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 3 Day of March, 2025 at 1:02:17 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By <u>SAM HIGGINS</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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