

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 L	2. Exact name of the Limited Liability Company			
1691663	Briarwood Home Ed	Briarwood Home Equity Solutions, LLC			
3. NAICS Code	,	Brief description of the character of business conducted in Rhode Island Purchase, sale, ownership, rental and management of residential real estate			
531390	——————————————————————————————————————	snip, rental and mane	igement of resid	Jenual real estate	
5. State of Formation					
RI					
6. Principal Office Address		City	State	Zip	
68 Countryside Dr.		Cumberland	RI	02864	
7. Mailing Address of Limite	ed Liability Company and Name or Tit	le of Contact Person			
Contact Name Francis J. Palma		Contact Title Member			
Street Address Same as above		City	State	Zip	
8. The Resident Agent info	mation currently of record with the R	Department of State is acco	urate. Changes requ	ire filing Form 642.	
	y, I declare and affirm that I have e tatements contained herein are tru		ding any accompar	nying schedules and	
Name of Authorized Person			Date /	1	
Francis J. Palma			2/2	23/25	
Signature of Authorized Pe	gon .			/	

MAIL TO:

Division of Business Services

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

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