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State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 2025
Partnership (LP, LLP, LLLP)

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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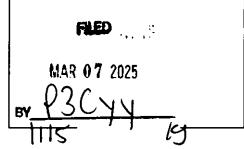
Entity ID Number	2. Exact Name of the Partnership						
000145502	CROSSWAYS ESTAYES						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
531110	0 00						
5. State of Formation	RENTAL REAL GOTATE						
R.I.							
6. Principal Office Address			City	State	Zip		
1 Jeffrey Ro	AD	,	NEWPORT	RI	07848		
7. The name and business address of each general partner or one or more partner(s); LP and LLLP only: an amendment is required to record a change in general partner(s) - use Form 301 (domestic) or Form 351 (foreign).							
PARTNER BUSINESS AD			ESS ADDRESS				
DOOD L RE	1 JEFFREY READ NEWPORT RIOZSYO						
Leslie M. RI	1 JEFFREY ROAD NEAR PORT RIL COSTO						
	,						
Under penalty of perjury, I de- and correct.	clare and affirm t	hat I have exam	ined this report, and that all	statements containe	ed herein are true		
Name of General Partner or Authorized Representative			· · · · · · · · · · · · · · · · · · ·	Date			
DOOD L. REED 03/04/80			1085				
Signature of General Partner or Authorized Representative							
Dung L Reed							

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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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

March 07, 2025 11:15 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

