

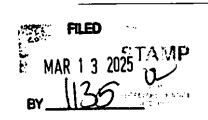
State of Rhode Island **Department of State - Business Services Division**

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 000444684	2. Exact name of the Limited Liability Company ELM PARSONAGE LLC			
3. NAICS Code 53 110 5. State of Formation RI	Brief description of the character of business conducted in Rhode Island REAL ESTATE HOLDINGS			
6. Principal Office Address		City	State	Zip
90 ELM STREET		PROVIDENCE	RI	02903
7. Mailing Address of Limited	Liability Company and Name or	Title of Contact Person		
Contact Name ROBERT GAUMONT		Contact Title PRESIDENT		
Street Address 90 ELM STREET		City PROVIDENCE	State	^{Zip} 02903
8. The Resident Agent inform	nation currently of record with the	e RI Department of State is accurate	e. Changes requir	e filing Form 642.
	, I declare and affirm that I hav stements contained herein are	re examined this report, including true and correct.	any accompany	ring schedules and
Name of Authorized Person ROBERT GAUMONT			Date 7/28/25	
Signature of Authorized Pers	ion PHB			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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