



State of Rhode Island
Department of State - Business Services Division

FILED

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.

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1. Entity ID Number 001684343		2. Exact name of the Limited Liability Company Healthy Family Counseling, LLC	
3. NAICS Code 624190		4. Brief description of the character of business conducted in Rhode Island Marriage and Family Counseling.	
5. State of Formation RI			
6. Principal Office Address 57 Old Danielson Pike		City Foster	State RI
		Zip 02825	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Jo-Ann Petrucci Andrews		Contact Title Manager	
Street Address 57 Old Danielson Pike		City Foster	State RI
		Zip 02825	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.			
Name of Authorized Person Jo-Ann P. Andrews		Date March 19, 2025	
Signature of Authorized Person <i>Jo-Ann Petrucci Andrews</i>			

MAIL TO:

Division of Business Services

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