



State of Rhode Island
Department of State - Business Services Division

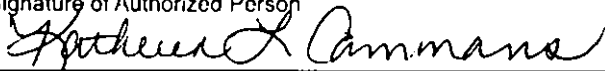
FILED

MAR 24 2025

BY

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 147054		2. Exact name of the Limited Liability Company SAND POINT PARTNERS, LLC		
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island OWNERSHIP AND MANAGEMENT OF REAL ESTATE		
5. State of Formation RHODE ISLAND				
6. Principal Office Address 119 WATSON AVENUE, P.O. BOX 464		City JAMESTOWN	State RI	Zip 02835
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name KATHLEEN L. CAMMANS		Contact Title MEMBER		
Street Address 119 WATSON AVENUE		City JAMESTOWN	State RI	Zip 02835
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 KATHLEEN L. CAMMANS			Date 3/10/25	
Signature of Authorized Person 				

MAIL TO:

Division of Business Services
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