State of Rhode Island No Fee
Office of the Secretary of State
Division Of Business Services 148 W. River Street
Providence RI 02904-2615
<b>1636</b> (401) 222-3040
Domestic Limited Liability Company Annual Report - Amended Filing Period: February 1 - May 1
In accordance with R.I.G.L. 7-1.2-1501(e), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.
This form is only to be used to amend the current annual report on file with this office.
ANNUAL REPORT YEAR: 2025
1. ID No. <u>001755834</u>
2. Exact Name of the Limited Liability Company LONGMEADOW ASSOCIATES LLC
3. State of Formation
State: <u>RI</u>
NAICS CODE
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.
<u>236117</u>
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
BUILDING HOUSES
5. Principal Office Address
No. and Street: <u>272 TIFFANY AVE</u>
City or Town:WARWICKState: RIZip: 02889Country: USA
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:
Contact Name: Contact Title:
No. and Street:272 TIFFANY AVECity or Town:WARWICKState: RIZip: 02889Country: USA
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

## JASON P. WHITE 212 TIFFANY AVENUE WARWICK , RI 02889

**Signed this 10 Day of April, 2025 at 1:04:25 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By JASON P WHITE

Signature of Authorized Person

Form No. 632 Revised 09/07

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