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State of Rhode Island Department of State - Business Services Division

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Annual Report for the year: **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	2. Exact name of the Limite	ed Liability Company				
001668412		ALBION LANDING LLC				
3. NAICS Code 531390		Brief description of the character of business conducted in Rhode Island LANDING MANAGEMENT				
5. State of Formation RHODE ISLAND						
6. Principal Office Address		City	State	Zip		
19 THOMPSON HILL ROAD		CUMBERLAND	RI	02864		
7. Mailing Address of Limited	d Liability Company and Name o	r Title of Contact Person				
FREDERICK A. PESATURO		Contact Title PRESIDENT				
Street Address 19 THOMPSON HILL RD		City CUMBERLAND	State RI	^{Zıp} 02864		
8. The Resident Agent inform	nation currently of record with the	I RI Department of State is accurate.	L . Changes require	Le filing Form 642.		
	r, I declare and affirm that I have etements contained herein are	re examined this report, including true and correct.	any accompany	ring schedules and		
Name of Authorized Person FREDERICK A. PES	ATURO	\ -	Date	Date Cypri 214, 2025		
Signature of Authorized Pers	Prolona	A Part	140	•		

MAIL TO:

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

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