

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 001708332	Exact name of the Limited Liability Company Watson's Way, LLC Brief description of the character of business conducted in Rhode Island hold and manage real estate			
3. NAICS Code 531390				
5. State of Formation RI				
6. Principal Office Address 180A Maxson Hill Road		City Ashaway	State RI	Zip 02804
7. Mailing Address of Limit	ed Liability Company and Name	or Title of Contact Person		<u></u>
Contact Name Dorothy W. Ramsay		Contact Title Manager		
Street Address 180A Maxson Hill Road		City Ashaway	State RI	Zlp 02804
8. The Resident Agent info	rmation currently of record with	the RI Department of State is a	ccurate. Changes requ	ire filing Form 642.
	i declare and affirm that I hav statements contained herein a		ding any accompany	ing schedules and
Namo of Authorized Person Dorothy W. Ramsay			Date 4/4/25	
Signature of Authorized Pe	pson July July J			
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

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FORM 632 - Revised: 04/2023