



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:
Limited Liability Company

2025

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

STAMP

FILED

APR 21 2025

BY

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|---|--|---|-----------------|
| 1. Entity ID Number 1782419 | | 2. Exact name of the Limited Liability Company PARGETT ADVISORS LT LLC | |
| 3. NAICS Code 531110 | | 4. Brief description of the character of business conducted in Rhode Island TAX PREP SERVICE | |
| 5. State of Formation RI | | | |
| 6. Principal Office Address 140 R JUDITH RD C-29 | | City NARRAGANSETT | State RI |
| | | Zip 02882 | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name WES BGA | | Contact Title MANAGER | |
| Street Address 80 LISINS RIDGE RD | | City RISKSAN | State CT |
| | | Zip 06897 | |
| 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 WESLEY BGA | | | Date 3/31/25 |
| Signature of Authorized Person <i>[Signature]</i> | | | |

MAIL TO:

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