State of Rhode Island
Department of State - Business Services Division

FILED
APR 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	2. Exact name of the Limited Liability Company
000157492	F. ANNICELLI LLC
3. NAICS Code: 621112 5. State of Formation: RI	4. Brief description of the character of business conducted in Rhode Island: MASTER'S DEGREE PSYCHOLOGIST SUPPORTING INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES

6. Principal Office Address	City	State	Zip
490 METACOM AVE	BRISTOL	RI	02908

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title		
FRED C. ANNICELLI	OWNER/MEMBER		
Street Address	**City**	**State**	**Zip**
134 PROSPECT AVE	NORTH KINGSTOWN	RI	02852

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	Date
FRED C. ANNICELLI	4/21/2025

Signature of Authorized Person: Fred C. Annicelli

MAIL TO:
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