

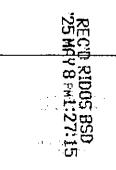
State of Rhode Island

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	2. Exact name of the Limited Liability Company			
000846719	DOUGLAS APARTMENTS, LLC			
3. NAICS Code 531110	4. Brief description of the character of business conducted in Rhode Island REAL ESTATE ACQUISITION, DEVELOPMENT, INVESTMENT, MANAGEMENT, AND HOLDINGS			
5. State of Formation RHODE ISLAND				
6. Principal Office Address		City	State	Zip
1565 DOUGLAS AVENUE		NORTH PROVIDENCE	RI	02904-3867
7. Mailing Address of Limited	Liability Company and Name or Titl	e of Contact Person	1	
CHARLES C HAJJAR		Contact Title MANAGER		
Street Address 30 ADAMS STREET		City MILTON	State MA	^{Zip} 02186
8. The Resident Agent informa	ation currently of record with the RI	Department of State is accurate. C	hanges require	filing Form 642.
	I declare and affirm that I have elements contained herein are tru	xamined this report, including an e and correct.	y accompanyi	ng schedules and
Name of Authorized Person			Date	
CHARLES C HAJJAR			4/25/2025	
Signature of the state of the s				

MAIL TO:

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

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