

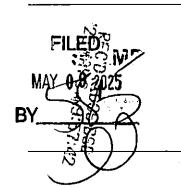
State of Rhode Island **Department of State - Business Services Division**

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.



1. Entity ID Number	2. Exact name of the Limited Liability Company			
000147446	Triangle Development, LLC			
3. NAICS Code 531311	4. Brief description of the character of business conducted in Rhode Island Maintenance, Ownership, Purchase; Sales and Rental of Property			
5. State of Formation		"		
6. Principal Office Address	1	City	State	Zip
1720 Mineral Spring Ave אינפ		North Providence	RI	02904
7. Mailing Address of Limited L	iability Company and Name or	Title of Contact Person		•
Contact Name David A. Grande		Contact Title Partner		
Street Address 1720 Mineral Spring Avenue		City North Providence	State RI	^{Zip} 02904
8. The Resident Agent informa	tion currently of record with the	RI Department of State is accurate.	Changes require	e filing Form 642.
	l declare and affirm that I hav ements contained herein are	e examined this report, including a true and correct.	any accompany	ring schedules and
Name of Adthor)zed Person			Date 4/28/2025	
Signature of Authorized Perso		nde	,	

MAIL TO:

Division of Business Services

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

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