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25 JUN 2 PM 2:39:27State of Rhode Island
Department of State - Business Services Division

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FOR
SECRETARY OF STATE
USE ONLYAnnual 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 001761458		2. Exact name of the Limited Liability Company Sandra Carruthers Nurse Practitioner LLC	
3. NAICS Code 021359		4. Brief description of the character of business conducted in Rhode Island Nurse Practitioner	
5. State of Formation Rhode Island			
6. Principal Office Address 10 Chambers Street		City Cumberland	State RI
		Zip 02864	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Sandra Carruthers		Contact Title Owner	
Street Address 55 Long Street		City Warwick	State RI
		Zip 02886	
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 Sandra Carruthers.		Date 05/29/2025	
Signature of Authorized Person 			

FILED

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BY 250

MAIL TO:

Division of Business Services
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