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

Annual Report for the year: 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.

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3:0:E GS:	USE ONLY

Entity ID Number	2. Exact name of the Limited Liability Company					
001781601	Anchor Group LLC					
3 NAICS Code	4. Brief description of the character of business conducted in Rhode Island  REAL ESTATE INVESTMENT AND DEVELOPMENT					
531110						
5. State of Formation						
RI						
6. Principal Office Address		City	State	Zıp		
31 PARKER STREET		CENTRAL FALLS	RI	02863		
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name		Contact Title				
Donte Lewis						
Street Address 31 PARKER STREET		City CENTRAL FALLS	State RI	<sup>Zip</sup> 02863		
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			
1)ante Lewis			6/16/2025			
Signature of Authorized Person						
L) Lew						

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED TON 16 COSS

FORM 632 - I

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