

Annual Report for the year: Partnership (LP, LLP, LLLP)

→ 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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BUS SVCS DIV

2025 AUG 27 A 931

Entity ID Number	2. Exact Name of the Partnership					
000049969	ATT ASSOCIATES, LP					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
531190	REAL ESTATE, OWNERSHIP AND RENTAL					
5. State of Formation						
RHODE ISLAND						
6. Principal Office Address	<del>*</del>		City		State	Zip
1150 RESERVOIR AVE			CRANSTON		RI	02920
7. The name and business add LP and LLLP only: an amendment				301 (dome:	stic) or Form	351 (foreign).
PARTNER	BUSINESS ADDRESS					
MARY MECHREFE		2 Davis Drive LINCOLN, RI				
ATT, Associates, Irrev Trust		1150 Reservoir Ave, Cranston, RI 02920				
8. Under penalty of perjury, I de and correct.	clare and affirm	that I have exam	ined this report, and the	it all stater	nents contai	ned herein are true
Name of General Partner or Authorized Representative			į	Date		
Mary Mechrefe			<b>\$</b>	8-1-2025		
Signature of General Partner May Medy	or Authorized R	epresentative				
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MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov AUG 27 2025 By J SOE 5 931 By