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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		
001694483	5 Dean Avenue, LLC		
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island		
531110	Acquiring, owning, managing, renting and disposing of real property		
5. State of Formation			
RI			
6. Principal Office Address	City	State	Zip
182 Perkins Street	Melrose	MA	02176
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name: Hale Lake	Contact Title: Manager		
Street Address: 182 Perkins Street	City: Melrose	State: MA	Zip: 02176
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: Hale Lake		Date: 09/25/25	
Signature of Authorized Person: Hale Lake			

FILED
SEP 26 2025
BY KV A300
11:35AM

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 632 - Revised: 12/2023