



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2026: 2026

1. ID No. 001796585

2. Exact Name of the Limited Liability Company Tucker Family Trust LLC

3. State of Formation

State: DE

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

531110

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

THE PURPOSES OF THE LLC ARE (I) TO INVEST IN, PURCHASE, OWN, DEVELOP, LEASE, SELL AND OTHERWISE TO DEAL WITH REAL AND PERSONAL PROPERTY OF ALL KINDS (II) TO DO ANY AND ALL THINGS AND EXERCISE ANY AND ALL POWERS NECESSARY OR ADVISABLE TO ACCOMPLISH THE FOREGOING, AND (III) TO DO ANY AND ALL THINGS WHICH SHALL AT ANY TIME APPEAR TO BE FOR THE BENEFIT OF THE LLC IN CONNECTION THEREWITH AND WHICH MAY NOW OR HEREAFTER BE LAWFUL FOR THE LLC TO PERFORM OR EXERCISE UNDER THE LAWS OF THE STATE OF RHODE ISLAND.

5. Principal Office Address

No. and Street: C/O LOURIE & CUTLER, P.C.
60 STATE STREET, 9TH FLOOR

City or Town: BOSTON State: MA Zip: 02109 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:
No. and Street: C/O LOURIE & CUTLER, P.C.
60 STATE STREET, 9TH FLOOR

City or Town: BOSTON State: MA Zip: 02109 Country: USA

**7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD SUITE 200 WARWICK , RI
02888

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 16 Day of January, 2026 at 1:09:00 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By JILL ALEXY
Signature of Authorized Person

Form No. 632
Revised 09/07

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