RI SOS Filing Number: 202212824670 Date: 3/14/2022 4:00:00 PM

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State of Rhode Island

Department of State - Business Services Division

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Annual Report for the year: $\frac{2022}{}$ **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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Entity ID Number	2. Exact name of the Limi	2. Exact name of the Limited Liability Company					
1659009	Maple Ave. Partners, LLC						
3. NAICS Code	4. Brief description of the	Brief description of the character of business conducted in Rhode Island					
531110	Real estate.	Real estate.					
5. State of Formation							
RI							
6. Principal Office Address		City	State	Zip			
294 Valley Road		Middletown	RI	02842			
	ed Liability Company and Name	or Title of Contact Person	•				
Contact Name J. Russell Jackson		Contact Title Registered Agent					
Street Address 122 Touro Street		^{City} Newport	State RI	^{Zip} 02840			
8. The Resident Agent infor	rmation currently of record with the	he RI Department of State is acci	urate. Changes requir	e filing Form 642.			
	I declare and affirm that I have tatements contained herein ar	e examined this report, includir e true and correct.	ng any accompanyin	g schedules and			
Name of Authorized Person	JADRES	· ?	Date / 27 / 22				
Signature of Authorized Po	rson						

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov