RI SOS Filing Number: 202217231860 Date: 5/10/2022 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

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1022 WAY TO PE 1255P

Annual Report for the year: 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.

| | • | | | |
|--|--|----------------------------------|-----------------|---|
| 1. Entity ID Number | 2. Exact name of the Limited Liability Company | | | |
| 131540 | Annandale Associates, LLC | | | |
| 3. NAICS Code | 4. Brief description of the chara | cter of business conducted in Rh | ode Island | |
| 531110 | Real Estate Investment | and Holdings | | |
| 5. State of Formation | | | | |
| Rhode Island | | | | |
| 6. Principal Office Address | | City | State | Zip |
| 450 Veterans Memorial Parkway, Suite 7A | | East Providence | RI | 02914 |
| 7. Mailing Address of Limited Lia | ability Company and Name or Title | e of Contact Person | • | |
| Contact Name James J. Belliveau | | Contact Title | | |
| Street Address 450 Veterans Memorial Parkway, 7A | | City East Providence | State RI | ^{Z_{IP}} 0291 4 |
| 8. The Resident Agent informati | on currently of record with the RI | Department of State is accurate. | Changes require | e filing Form 642. |
| | clare and affirm that I have exar ments contained herein are true | | y accompanying | g schedules and |
| Name of Authorized Person | | | Date | |
| James J. Belliveau | | | 7- | 29.22 |
| Signature of Authorized Person | / · | | | - |

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