	State of	Rhode Isla	nd	Fee: \$50.00
	Office of the	Secretary of	of State	
		f Business Ser		
148 W. River Street Providence RI 02904-2615				
7636) 222-3040	015	
Limited Liability C Annual Report Filing Period: Februa				
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 2024 : <u>2024</u>				
1. ID No. <u>001695969</u>				
2. Exact Name of the Limited Liability Company Greenwich Bay Wealth Management, LLC				
3. State of Formation				
State: <u>RI</u>				
NAICS CODE				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>523930</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
INVESTMENT AND FINANCIAL BUSINESS PLANNING.				
5. Principal Office Address				
No. and Street:	PO BOX 1001			
City or Town:	EAST GREENWICH	State: <u>RI</u>	Zip: <u>02818</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
	MES E JOLY Contact Title:			
No. and Street: City or Town:	233 MAIN STREET EAST GREENWICH	State: <u>RI</u>	Zip: <u>02818</u>	Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
JAMES JOLY 233 MAIN STREET EAST GREENWICH , RI 02818				

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

Signed this 1 Day of April, 2024 at 6:52:04 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 JAMES JOLY

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved