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THE STATE OF

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:	2024
Partnership (LP, LLP, LLLP)	

→ 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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1. Entity ID Number	2. Exact Name	of the Partnersh	ip		-		
000103886	Bristol Assisted Living L.P.						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
531110							
5. State of Formation	To engage in the real estate business; Title 7-1.1-51						
Rhode Island							
6. Principal Office Address		· · · · · · · · · · · · · · · · · · ·	City		State	Zip	
150 Franklin Street			Bristol		Ri	02809	
7. The name and business add	dress of each gen	eral partner or o	ne or more partner(s	S): Form 301 (dom	astle) or Form	351 (locoino)	
PARTNER	t is required to record a change in general partner(s) - use Form 301 (domestic) or Form 351 (foreign). BUSINESS ADDRESS						
DAI Inc		450 5	- 011 Distri	DI 00000	<u> </u>		
BAL, Inc. 150 Franklin Street, Bristol, RI 02809							
			 				
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 Under penalty of perjury, I denote the analysis of t	eclare and affirm	that I have exan	nined this report, and	d that all state	einents conta	ained herein ere true	
Name of General Partner or	Authorized Repre	esentative] [Date		
Catherine Tattrie 4/29/24							
Signature of General Partner					-+-+		
Catherin	1 Told	s .					
	1						
MAIL TO:							
Division of Business Services		•					
148 W. River Street, Providence, Phone: (401) 222-3040	Rhode Island 029	04-2615					
Website: www.sos.ri.gov						į	