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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: **Limited Liability Company**

2024

MAY 062022 STAND

→ 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				
T-86793	Conreal, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
531120	Real estate investment and management				
5 State of Formation					
Rhode Island					
6. Principal Office Address	· · · · · · · · · · · · · · · · · · ·	City	State	Zıp	
21 Powder Hill Rd		Lincoln	RI	02865	
7. Mailing Address of Limited Li	ability Company and Name or T	tle of Contact Person			
Contact Name Daniel Checrallah		Contact Title Accounting Manager			
Street Address 21 Powder Hill Rd		City Lincoln	State RI	^{Zip} 02865	
8. The Resident Agent informat	ion currently of record with the F	I Department of State is ac	curate. Changes require	e filing Form 642	
9. Under penalty of perjury, I statements, and that all state	declare and affirm that I have ments contained herein are tr	examined this report, include and correct.	uding any accompany	ring schedules and	
Name of Authorized Person			Date	Date	
Suzanne Conley			4/29/2024		
Signature of Authorized Person Signary Llml	щ				

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

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