



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00

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.

1. ID No. 99933		2. Exact name of the limited liability company The Golden Porthole, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE HOLDINGS / RENTAL PROPERTIES	
5. Principal office address 179 W Beach Rd		City Charlestown	State RI
		Zip 02813	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Diana Welch		Contact Title owner / member	
Street Address 179 W Beach Rd		City Charlestown	State RI
		Zip 02813	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐			
Manager Name Diana Welch		Manager Name William Welch	
Street Address 179 W Beach Rd		Street Address 179 W Beach Rd	
City Charlestown	State RI	City Charlestown	State RI
Zip 02813		Zip 02813	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name DIANA C. WELCH		Address	
Address 179 WEST BEACH ROAD		City CHARLESTOWN	Zip 02813-

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

File Date	FILED
Check No.	SEP 25 2007
By:	By 5355
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Diana Welch 8/28/07
Signature of Authorized Person Date
Diana Welch
Print or Type Name of Authorized Person