



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

1. ID No. 147975		2. Exact name of the limited liability company Harbor Watch, 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 HOLDING COMPANY			
5. Principal office address 169 WELLINGTON AVENUE		City NEWPORT		State RI	Zip 02840-
Contact Name AMORY ROSS		Contact Title .			
Street Address PO BOX 682		City NEWPORT		State RI	Zip 02840-
Manager Name AMORY ROSS		Manager Name .			
Street Address PO Box 682		Street Address .			
City Warren	State RI	Zip 02840	City .	State .	Zip .
Manager Name .		Manager Name .			
Street Address .		Street Address .			
City .	State .	Zip .	City .	State .	Zip .
Agent Name TURNER C. SCOTT		Address 122 TOURO STREET			
Address MILLER SCOTT & HOLBROOK		City NEWPORT		Zip 02840-	

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



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\*147975 DLLC 07/31/07 10:20:09 AM\*

**FILED**

File Date

**OCT 01 2007**

Check No.

By:

**By JF 9/14**

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.

*Amory Ross* 9/19/07  
Signature of Authorized Person Date

**AMORY ROSS**

Print or Type Name of Authorized Person