

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 2008

Filing Period: September 1 - November 1 - Filing Fee: \$50.00* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* 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. 86911		t name of the limited liability company IPORT VINEYARDS AND WINERY, LLC					
3. State of Formation Rhode Island	4. Brief description of Operating Vin	4. Brief description of the character of the business which is actually conducted in Rhode Island Operating Vineyard and Winery					
5. Principal office address 909 East Main Rd.			City Middletown	State RI	^{Zip} 02840		
6. MAILING ADI Contact Name John F. Nunes		fy Company an	D NAME OR TITLE OF CONTA Contact Title	CT PERSON:			
Street Address 909 East Main	treet Address 09 East Main Rd.			State RI	2ip 02840		
46754	DDRESS OF EACH MANAGE FILL IN SP.	R OF THE LIMIT ACES BEFORE US	ED LIABILITY COMPANY, IF A ING ATTACHMENTS ("X" BO) Manager Name	PPLICABLE - <u>DO NO</u> (FOR ATTACHMENT) [r List Members		
Street Address			Street Address	Street Address			
City -	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	SENT IN RHODE ISLAND is currently of record in the Of	ice of the Secretary	of State. Changes require filing	of Form 642 - R.I.G.L. 7-	The Control of the Co		

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

86911

	FILED	
File Date		
Check No.	OCT 06 2008	
Pv:	By 14871	
FOR	SECRETARY OF STATE USE ON	ILY

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.

Singeture of Authorized Barron

Date

105

Print or Type Name of Authorized Person