

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 158214		name of the limited liability company lagic Boat, LLC					
3 State of Formation 4. Brief description of the character of the Inistness holding company			s which is actually conducted in Rhode Island				
Principal office address James Street				City Middletown	State RI	^{Zip} 02842	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAMI Contact Name Robert D. Harrington, Jr.				NAME OR TITLE OF CONTAC Contact Title Manager	Contact Title		
Street Address 18 Burying Hill Road				City Greenwich	State CT	Ζip 06831	
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 Robert D. Harrington, Jr.				Manager Name	Manager Name		
Street Address 18 Burying Hill Road				Street Address	Street Address		
спу Greenwich		State CT	2φ 06831	Сііу	State	Zip	
Manager Name				Manager Name			
Street Address				Street Address	Street Address		
City		State	Zip	City	State	Zip	
8. RESIDENT AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11							

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

158214

10303

File Date FILED

Check No. NOV 1 2 2009

By: FOR SECRET SQUESTATE US ON STATE US ON SECRET SAME STATE US ON STATE

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.

Signature of Authorized Person

Robert D. Harrington, Jr.

Print or Type Name of Authorized Person

7. Nov. 2009

Form 632 Rev. 08/08