



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

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK  
\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

|   |              |  |   |              |              |
|---|--------------|--|---|--------------|--------------|
| 1. Corporate ID No.<br>106416   |              | 2. Name of Corporation<br>Herreshoff Designs, Inc. |   |              |              |
| 3. Street Address Principal Business Office<br>18 Burnside Street, P.O. Box 197   |              |  | City<br>Bristol   | State<br>RI  | Zip<br>02809 |
| 4. Business Phone No.<br>(401) 253-5000   |              | 5. State of Incorporation<br>Rhode Island          |   |              |              |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br>TO ENGAGE IN THE BUSINESS OF DESIGNING, ENGINEERING, CONSTRUCTING, AND THE SALE OF SAIL AND POWER YACHTS AND BOATS |              |  |   |              |              |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS   |              |  |   |              |              |
| President Name<br>Halsey C. Herreshoff  |              |  | Vice President Name<br>Adam Langerman                               |              |              |
| Street Address<br>125 Hope Street   |              |  | Street Address<br>19 Usher Terrace                                  |              |              |
| City<br>Bristol   | State<br>RI  | Zip<br>02809                                       | City<br>Bristol   | State<br>RI  | Zip<br>02809 |
| Secretary Name<br>Halsey C. Herreshoff, II  |              |  | Treasurer Name<br>Adam Langerman                                    |              |              |
| Street Address<br>59 High Street  |              |  | Street Address<br>19 Usher Terrace                                  |              |              |
| City<br>Bristol   | State<br>RI  | Zip<br>02809                                       | City<br>Bristol   | State<br>RI  | Zip<br>02809 |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS  |              |  |   |              |              |
| Director Name<br>Halsey C. Herreshoff   |              |  | Director Name<br>Halsey C. Herreshoff, II                           |              |              |
| Street Address<br>125 Hope Street   |              |  | Street Address<br>59 High Street                                    |              |              |
| City<br>Bristol   | State<br>RI  | Zip<br>02809                                       | City<br>Bristol   | State<br>RI  | Zip<br>02809 |
| Director Name<br>Nathanael G. Herreshoff, III   |              |  | Director Name<br>Adam Langerman                                     |              |              |
| Street Address<br>43 Mayfaire Circle  |              |  | Street Address<br>19 Usher Terrace                                  |              |              |
| City<br>Westampton  | State<br>NJ  | Zip<br>08060                                       | City<br>Bristol   | State<br>RI  | Zip<br>02809 |
| 9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>  |              |  | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |              |              |
| AUTHORIZED SHARES   |              |  | ISSUED SHARES — THIS SECTION MUST BE COMPLETED                      |              |              |
| Number of Shares  | Class/Series | Par Value  | Number of Shares  | Class/Series | Par Value    |
| 2,000   | Common       | No Par Value                                       | 500   | Common       | No Par       |

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

|                                 |          |
|---------------------------------|----------|
| File Date                       | 12-30-09 |
| Check No.                       | 15765    |
| By:                             | MNC      |
| 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.

*Halsey C. Herreshoff* 28 DEC 2009  
Signature Date

Halsey C. Herreshoff  
Print or Type Name  
President  
Title