



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR **2012**

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 157274		2. Exact name of the limited liability company LILWILLIANN, LLC			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Yachting Company			
5. Principal office address 36 Washington Square		City Newport		State RI	Zip 02840
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON					
Contact Name Thomas Thornton		Contact Title Manager			
Street Address 2668 Berkshire Road		City Cleveland Heights		State OH	Zip 44106
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS (*X1 BOX FOR ATTACHMENT) ☐					
Manager Name Thomas Thornton		Manager Name			
Street Address 2668 Berkshire Road		Street Address			
City Cleveland Heights	State OH	Zip 44106	City	State	Zip
Manager Name		Manager Name			
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 Form 642.					

File Date
Check No.
By
FOR SECRETARY OF STATE USE

FILED
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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
Date **12/8/12**
Thomas V. Thornton
Print or Type Name of Authorized Person