

## 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

2015

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.	2. Exact na	2. Exact name of the limited liability company					
797321	2	RI YACHTURNORES LLC					
3. State of Formation 4. Brief description of the character			cter of business conducted in	n Rhode Island			
DE.	YE	tour Ch	orter Court	ter Company			
5. Principal office address	RD		City N. Smill	held State R	Z Zip 0189		
6. MAILING ADDRESS OF L	IMITED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONT	ract Person:	2. 14. 15. 15. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14	Prilit	
Contact Name Ret A	UM.	theorn	Contact Title	Contact Title MANAGING PARTINER			
Street Address	um FASA	us Ligare	City Sureth	held State 2	Z Zip OJ9	<u> </u>	
7. LIST <u>ALL</u> MANAGERS (N ("X" BOX FOR ATTACHM	IAMÉS AND ADI		LIMITED LIABILITY COMP	ANY, IF APPLICABLE - DO	NOT LIST MEMBER	\$	
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City ,	State	Zip	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
8. RESIDENT AGENT IN RH	ODE ISLAND	I					
This information is currently	y of record in the	e Office of the Secr	etary of State. Changes re	quire filing Form 642.			

Under peralty 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. File Date Check No Signature of Authorized Person, Date RIAN M. FOR SECRETARY OF STATE USE ONLY

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012