

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2016
Limited Liability Company

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 114720	2. Exact name of the Limited Liability Company NAUTA, LLC					
3. NAICS Code 71 5. State of Formation	Brief description of the character of business conducted in Rhode Island BOATING					
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
8 FREEBODY STREET			NEWPORT	RI	02840	
7. Mailing Address of Limited Lia	ability Compa	any and Name or	Title of Contact Person			
Contact Name JAMES F. HYMAN			Contact Title REGISTERED	Contact Title REGISTERED AGENT		
Street Address 8 FREEBODY STREET			City NEWPORT	State RI	Zip 02840	
8. List ALL managers (names a	nd addresse	s) of the Limited	Liability Company, IF APPLICABL	E - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
	.			Check the box to	indicate an attachment	
9. Resident Agent in Rhode Isla	nd. This inform	nation is currently o	f record with the Department of State.	Changes require fil	ing Form 642.	
Under penalty of perjury, I dec statements, and that all states			xamined this report, including true and correct.	any accompanyi	ng schedules and	
Name of Authorized Person				Date		
mark Distefuno, member				10/14	1/16	
Signature of Authorized Person		# 12	TALAN MUM			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

