

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: 2017 Corporation

→ Filing period: January 1 - March 1
→ Filing Fee: \$50.00

1. Entity ID Number <b>16078</b>		2. Exact name of the Corporation  Hazard's Beach, Inc					
3. Principal Office Address c/o 31 America's Cup Ave	·			City Newport		Zip <b>02840</b>	
4. NAICS Code	6. Brief desc	ription of the chara	cter of business o	onducted in Rhode	Island	<u></u>	
81 - Other Services (except	Pul To own and	d operate a beach	facility				
5. State of Incorporation Rhode Island							
7. List ALL officers (names an	d addresses)			Chec	k the box to in	dicate an attachment _	
President Name Jeremiah C. L	Vice-President Name Christopher J. Behan						
Street Address 31 Harris Ave	Street Address 4 Anthony Court						
City Portsmouthy	State RI	<sup>Zip</sup> 02871	City Newport		State RI	<sup>Zip</sup> 02840	
Secretary Name Donald Kauli			Treasurer Name Christopher J. Behan				
Street Address 43 Benedict Ave			Street Address 4 Anthony Court				
City Portsmouth	State RI	<sup>Zip</sup> 02871	City Newpor	t	State RI	<sup>Zip</sup> 02840	
8. List ALL directors (names a	nd addresses)		Disastas Nama	Chec	k the box to in	dicate an attachment 🗹	
Director Name  Jeremiah C. Ly	nch III		Director Name	Christopher J. Be	han		
Street Address 31 Harris Ave			Street Address	4 Anthony Court			
City Portsmouth	State RI	<sup>Zip</sup> 02871	City Newport		State RI	Zip <b>02840</b>	
Director Name Donald Kaull	·	·	Director Name	Louis G. Murphy	Jr		
Street Address 43 Benedict Av	re		Street Address	220 Carroll Ave			
City Portsmouth	State RI	<sup>Zip</sup> 02871	City Newport		State RI	<sup>Zip</sup> <b>02840</b>	
9. Shares Authorized		10. Shares Iss		Chec CLASS/SER		dicate an attachment PAR VALUE	
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES  338		ies I	no par value	
					common		
11. This report must be execut trustee, this report must be ex					ooration is in th	ne hands of a receiver o	
Under penalty of perjury, I d	eclare and affirm	that I have examin	ed this report, i		mpanying sc	hedules and	
<i>statements, and that all state</i> Name of Authorized Represen		nerein are true ai	na correct.		Date		
Christopher J. Behan					21	1/2017	
Signature of Authorized Repre	sentative	Con.	<u>Juhan</u> IL	·		,	
بالمتعز ا			_	FILED			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FEB 03 2017

FORM 630 - Revised: 10/2016

## HAZARD'S BEACH, INC. (16078) ANNUAL REPORT FOR THE YEAR 2017

## **Attachment**

## **8 Directors (Continued):**

Dr. Jennifer Booth 75 Marchant Street Newport, RI 02840

Peter Crowley 53 Kay Blvd. Newport, RI 02840

Michael Fitzgerald 95 Green End Avenue Middletown, RI 02842

Patrick O'Connell 36 Cornelius Drive Portsmouth, RI 02871 Jan Campbell 43 Toppa Blvd. Newport, RI 02840

Henry DeCotis 72 Old Fort Road Newport, RI 02840

Marilynne Manning 20 Whitewell Avenue Newport, RI 02840

Patrick Horgan, III 320 Bromelaid

West Palm Beach, FL 33401