



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

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number <b>304805</b>		2. Exact name of the Corporation <b>WitchLi, Ltd.</b>			
3. Principal Office Address <b>8 FREEBODY STREET, P.O. BOX 549</b>			City <b>NEWPORT</b>	State <b>RI</b>	Zip <b>02840</b>
4. NAICS Code <b>71 - Arts, Entertainment, and R</b>		6. Brief description of the character of business conducted in Rhode Island <b>THE ACQUISITION, OWNERSHIP AND MAINTENANCE OF YACHTS, BOATS AND VESSELS</b>			
5. State of Incorporation <b>RI</b>					
7. List ALL officers (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>WILLIAM W. STELLE</b>			Vice-President Name		
Street Address <b>123 25TH AVENUE</b>			Street Address		
City <b>SEATTLE</b>	State <b>WA</b>	Zip <b>98122</b>	City	State	Zip
Secretary Name <b>FREDERICK STELLE</b>			Treasurer Name		
Street Address <b>48 FOSTER AVENUE</b>			Street Address		
City <b>BRIDGEHAMPTON</b>	State <b>NY</b>	Zip <b>11932</b>	City	State	Zip
8. List ALL directors (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>WILLIAM W. STELLE</b>			Director Name		
Street Address <b>123 25TH AVENUE</b>			Street Address		
City <b>SEATTLE</b>	State <b>WA</b>	Zip <b>98122</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		PAR VALUE
			<b>100</b>		<b>0.00</b>
11. 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. <b>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.</b>					
Name of Authorized Representative <b>FREDERICK STELLE</b>				Date <b>January 25, 2017</b>	
Signature of Authorized Representative 				<div style="text-align: center;"> <b>FILED</b>  <b>FEB 23 2017</b>  <b>10892</b>  <b>laor</b> </div>	

MAIL TO:  
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