



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>59361</b>		2. Exact name of the Corporation <b>Harmony Fisheries, Inc</b>	
3. Principal Office Address <b>High Street</b>		City <b>Block Island</b>	State <b>RI</b>
		Zip <b>02807</b>	
4. NAICS Code <b>11</b>	6. Brief description of the character of business conducted in Rhode Island <b>Fishing and related activities</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>Charlie S. Dodge</b>		Vice-President Name <b>Clancy F. Dodge</b>	
Street Address <b>2236 Main Street</b>		Street Address <b>2236 Main Street</b>	
City <b>S. Chatham</b>	State <b>MA</b>	Zip <b>02659</b>	City <b>S. Chatham</b>
			State <b>MA</b>
			Zip <b>02659</b>
Secretary Name <b>Clancy F. Dodge</b>		Treasurer Name <b>Charlie S. Dodge</b>	
Street Address <b>2236 Main Street</b>		Street Address <b>2236 Main Street</b>	
City <b>S. Chatham</b>	State <b>MA</b>	Zip <b>02659</b>	City <b>S. Chatham</b>
			State <b>MA</b>
			Zip <b>0259</b>
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>Charlie S. Dodge</b>		Director Name <b>Clancy F. Dodge</b>	
Street Address <b>2236 Main Street</b>		Street Address <b>2236 Main Street</b>	
City <b>S. Chatham</b>	State <b>MA</b>	Zip <b>02659</b>	City <b>S. Chatham</b>
			State <b>MA</b>
			Zip <b>02659</b>
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>A</b>
			<b>No Par Value</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>Charlie S. Dodge</b>			Date <b>6/13/17</b>
Signature of Authorized Representative 			

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED****JUN 27 2017**BY 5592/1001

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