State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STAINE

Annual Report for the year: 2017 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 487652	2. Exact name of the Limited Liability Company WINSTEAD'S MARINA LLC					
3. NAICS Code 1 3 30 5. State of Formation RI	4. Brief description of the character of business conducted in Rhode Island MARINA					
6 Principal Office Address 472-8 TIFFANY AVENUE			City WARWICK	State RI	Zip 02889	
7. Mailing Address of Limited Li	ability Compa	ny and Name or				
Contact Name JOYCE W. BUTLER			Contact Title OWNER	Contact Title OWNER		
Street Address 472-8 TIFFANY AVENUE			City WARWICK	State RI	^{Zip} 02889	
	and addresse:	s) of the Limited	Liability Company, IF APPLICAE	BLE - DO NOT LIST I	MEMBERS	
Manager Name NONE			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 i	ndicate an attachment	
9. Resident Agent in Rhode Isla	ind. This inform	nation is currently (of record with the Department of Sta	ite. Changes require filir	ig Form 642.	
Under penalty of perjury, I de statements, and that all state			examined this report, including true and correct.	g any accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
JOYCE W. BUTLER				9/13/2017		
Signature of Authorized Person	Jake	_ W. Ba	DEMUMENT HERE			

MAIL TO:

Division of Business Services

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

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

