

State of Rhode Island and Providence Plantations

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

## 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.

Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company				
489527	POLA	POLARIS YACHTING, LLC				
3. NAICS Code	4. Brief de:	4. Brief description of the character of business conducted in Rhode Island				
413990	MARINE	MARINE				
5. State of Formation						
RI						
6. Principal Office Address			City	State	Zip	
625 THAMES STREET			NEWPORT	RI	02840	
7. Mailing Address of Limited	Liability Compa	any and Name o			•	
Contact Name MAURICE CUSICK			Contact Title ATTORNEY	Contact Title ATTORNEY		
Street Address 625 THAMES STREET			City NEWPORT	State RI	<sup>Zip</sup> 02840	
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICAL	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name		<u> </u>	Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	<b>t</b>	<b>t</b>		Check the box to	indicate an attachment	
9. Resident Agent in Rhode Is	land. This inform	nation is currently	of record with the Department of Sta	ate. Changes require film	ng Form 642.	
Under penalty of perjury, I d statements, and that all stat			examined this report, including true and correct.	g any accompanyin	g schedules and	
Name of Authorized Person				Date		
MAURICE CUSICK, ESQ.				12/12/2017		
Signature of Authorized Perso	" MAURI	( <del>GE</del> (	JEW FI			

MAIL TO:

**Division of Business Services** 

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

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