



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2018**
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

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

FILED

FEB 23 2018

BY

36049

1. Entity ID Number 35243		2. Exact name of the Corporation RHODE ISLAND MOORING SERVICES, INC.												
3. Principal Office Address 15 PATROL ROAD, DAVISVILLE			City NORTH KINGSTOWN	State RI	Zip 02852									
4. NAICS Code 813990		6. Brief description of the character of business conducted in Rhode Island MOORINGS AND RELATED SERVICES FOR PLEASURE AND COMMERCIAL VEHICLES												
5. State of Incorporation RI														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name RICHARD DESALVO			Vice-President Name JOHN L. SWEENEY											
Street Address 15 PATROL ROAD, DAVISVILLE			Street Address 134 AQUIDNECK AVENUE											
City NORTH KINGSTOWN	State RI	Zip 02852	City MIDDLETOWN	State RI	Zip 02842									
Secretary Name TURNER C. SCOTT			Treasurer Name JOHN L. SWEENEY											
Street Address 122 TOURO STREET			Street Address 134 AQUIDNECK AVENUE											
City NEWPORT	State RI	Zip 02840	City MIDDLETOWN	State RI	Zip 02842									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name NONE			Director Name NONE											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name NONE			Director Name NONE											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>												
This information is currently of record in the Department of State. Changes require an additional filing.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>COMMON</td> <td>\$0.00</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	COMMON	\$0.00			
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		100	COMMON	\$0.00										
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.														
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.														
Name of Authorized Representative RICHARD DESALVO					Date 1/26/2018									
Signature of Authorized Representative <i>[Signature]</i>														

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov