

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018 Corporation

STAMP

- → Filing period: January 1 March 1
- → Filing Fee: \$50.00
- -> Penalty: Additional \$25.00 fee if form is not filed by April 1.

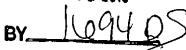
1. Entity 1D Number	2. Exact nam	2. Exact name of the Corporation					
17706		NORTHEAST MARINE PILOTS, INC.					
3 Principal Office Address			City		State	Zıp	
243 Spring Street			Newport		RI	02840	
4. NAICS Code	6. Brief descr	6. Brief description of the character of business conducted in Rhode Island					
561990	Administrat	Administrative and support services to marine pilots					
5. State of Incorporation							
Rhode Island							
7. List ALL officers (names a	nd addresses)			Chec	k the box to i	ndicate an attachment 🗵	
President Name Sean Bogus			Vice-President Name Richard Astles				
Street Address 243 Spring St	Street Address 16 Fairview Street						
City Newport	State RI	^{Zip} 02840	City Ivoryton		State CT	Z _{IP} 06442	
Secretary Name Clinton Walker			Treasurer Name E. Howard McVay, Jr.				
Street Address 21 Madison Drive			Street Address 243 Spring Street				
City East Sandwich	State MA	Z _{IP} 02537	City Newport		State RI	^{Zip} 02840	
8. List ALL directors (names	and addresses)	1 -		Chec	k the box to i	ndicate an attachment 🕢	
Director Name Sean Bogus			Director Name Richard Astles				
Street Address 243 Spring Street			Street Address 16 Fairview Street				
City Newport	State RI	Zip 02840	City Ivoryton		State CT	Zip 06442	
Director Name Clinton Walker			Director Name E. Howard McVay, Jr.				
Street Address 21 Madison D	Street Address 243 Spring Street						
City East Sandwich	State MA	Zip 02537	City Newpor			Žip 02840	
9. Shares Authorized	<u> </u>	10. Shares Iss				adicate an attachment 🖂	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARE'S			CLASS/SERIES PAR VALUE		
		1,500		Common		No Par	
11. This report must be execu	uted on behalf of the	corporation by an	authorized repres	entative. If the corn	oration is in t	he hands of a receiver or	
trustee, this report must be e	xecuted on behalf of	the corporation by	the receiver or tri	ustee.			
Under penalty of perjury, I	declare and affirm t	hat I have examin	ned this report, in	ncluding any acco	mpanying s	chedules and	
statements, and that all statements contained herein are true and correct. Name of Authorized Representative					Date	Date	
Sean Bogus						21 Feb 2018	
Signature of Authorized Repr	resentative	.		FILED		_ _ _ _	
Jean P. Bo	·	SIGN DO	CUMENT HERE				
		-		R 0 2 2018		 	

MAIL TO:

Division of Business Services

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

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



FORM 630 - Revised, 10/2017

NORTHEAST MARINE PILOTS, INC.

Corporate ID: 17706 2018 Annual Report Secretary of State

Continuation Sheet

OFFICERS:

Treasurer 2: Vincent C. Kirby 17 Bryer Avenue Jamestown, RI 02835

DIRECTORS:

Vincent C. Kirby 17 Bryer Avenue Jamestown, RI 02835

Northeast Marine Pilots AR Addendum

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