

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222 3040

# LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. ID No. 86911 2 Exact name of the limited liability company
NEWPORT VINEYARDS AND WINERY LLC

100511	MEWFORT VINE	TAINDS AND WINE	LINT, LLG		
3. State of Formation	l '	, ,	he business which is actually conducted	i in Rhode Island	
RHODE ISLAND	OPERATING	VINEYARD AND W	INERY.		
5. Principal office add	ress		City	State	Zip
909 EAST MAIN	N ROAD		MIDDLETOWN	RI	02842
6. MAILING ADD	RESS OF LIMITED	LIABILITY COMP	ANY AND NAME OR TITLE	OF CONTACT PER	ISON:
Contact Name JOHN F NUNES			Contact Title		
Street Address			City	State	Zip
909 EAST MAIN	I ROAD		. MIDDLETOWN	RI	02842-
7. NAMÉ AND AD	FILL IN S	PACES BEFORE USIN	LIMITED LIABILITY COM IG ATTACHMENTS ("X" BOX I UIRES FILING OF AMENDMENT.	FOR ATTACHMENT) 🛘	
Manager Name			• Manager Name •		
Street Address			· Sircet Address		
City	State	Zip	City	State	Zıp
Manager Name			*Manager Name		
Street Address			·Street Address		
City	State	Zıp	City	State	Zip
	NT IN RHODE ISLAN	DDO NOT ALTER- C	hanges require filing of F	orm 642 - R.I.G.L., 7-	16-11
Agent Name			Address		
BRIAN G. BARDORF, ESQ.		36 WASHINGTON	36 WASHINGTON SQUARE		
Address	-		City	Z	ip
			NEWPORT		2840

This report must be signed in ink by an authorized person pursuant to 7-16-66.





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*86911 DL	LC 09/08/05 02:54:14 PM*
File Date	10/19/05
Check No.	11370
Ву.	Mr.J.
FOR SLCRET	ARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined	
his report, including any accompanying schedules and statements,	
and that all statements contained herein are true and correct.	

Signature of Authorized Person Date

John F. Nunes, Jt. M. Member

Form 632 Rev. 6/02



Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

# LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004

Filing Period: September 1 - November 1 • Filing Fce: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) I. ID No. 2. Exact name of the limited liabilty company 86911 NEWPORT VINEYARDS AND WINERY, LLC 4. Brief description of the character of the business which is actually conducted in Rhode Island 3. State of Formation OPERATING VINEYARD AND WINERY. **RHODE ISLAND** 5. Principal office address 909 EAST MAIN ROAD MIDDLETOWN RI 02842 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title JOHN F NUNES Street Address City State 909 EAST MAIN ROAD . MIDDLETOWN RI 02842-7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (Z) / 7-16-52 Manager Name · Manager Name Street Address · Street Address City Zip ·City State Zip Manager Name Manager Name Sircei Address ·Street Address City Zip ,Cin State Zρ 8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.GL. 7-16-11 Agent Name **BRIAN G. BARDORF** 130 BELLEVUE AVENUE Address City Zър NEWPORT 02840

This report must be signed in ink by an authorized person pursuant to 7-16-66.



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B <sub>Y</sub> . US.	
FOR SECRETARY OF STA	TE USE ONLY

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.

AT Cuf my

9-28-04

Signature of Authorized Person

Date

John F. Nunes

M Merber.

Print or Type Name of Authorized Person



FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2003

Filing Period: September 1 - November 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. ID No. 2. Exact name of the limited liabilty company 86911 NEWPORT VINEYARDS AND WINERY, LLC 3. State of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island OPERATING VINEYARD AND WINERY. RHODE ISLAND 5. Principal office address 909 EAST MAIN ROAD MIDDLETOWN RΙ 02842 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title JOHN F NUNES, Jr. Street Address City State Zip 909 EAST MAIN ROAD . MIDDLETOWN RI 02842-7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-18-12 (a) (2) / 7-16-52 Manager Name · Manager Name Street Address · Street Address City State Zip City State Zip Manager Name Manager Name Street Address ·Sircet Address City State Zip City State 8. RESIDENT AGENT IN RHODE ISLAND DO NOT ALTER- Changes require filing of Form 642 - R.I.GL. 7-16-11 Agent Name Address **BRIAN G. BARDORF** 130 BELLEVUE AVENUE Address City Ζip NEWPORT 02840 This report must be signed in ink by an authorized person pursuant to 7-16-66. 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. \*86911 DLLC 09/04/03 11:18:19 AM\* Check No Nunes, Jr.

Print or Type Name of Authorized Person



Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 2. Exact name of the limited liabilty company \*86911 NEWPORT VINEYARDS AND WINERY, LLC 3. State of Formation Brief description of the character of the business which is actually conducted in Rhode Island OPERATING VINEYARD AND WINERY. RHODE ISLAND 5. Principal office address Cin State Zip 909 EAST MAIN ROAD MIDDLETOWN RI 02842 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title JOHN F NUNES JR. Street Address City State Zip 909 EAST MAIN ROAD . MIDDLETOWN RI 02842-7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ~ ("X" BUN FOR ATTACHMENT) ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52 Manager Name · Manager Name Street Address · Sircei Address City Zip \*Cin State Zip Manager Name Manager Name Street Address ·Street Address Cin State Siare Ziρ 8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filling of Form 642 - R.I.G.L. 7-16-11 **BRIAN G. BARDORF** 130 BELLEVUE AVENUE Address Cin Zip NEWPORT 02840

This report must be signed in ink by an authorized person pursuant to 7-16-66.



*86911 D	LLC9/23/021:56:52 PM*
File Date	11-1-00
Check No.	7768
By:	de
FOR SECRE	TARY OF STATE USE ONLY

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.

Signature of Authorized Person

Date

John F. Nunes, Jr.

Print or Type Name of Authorized Person

To be filed annually between September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State **Corporations Division** 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

ID	Number DLLC 86911	Annual Report for the year 2001
1.	The name of the limited liability compa	any is:
	NEWPORT VINEYARDS AND WINE	RY, LLC
2.	The address of the principal office of	the limited liability company is:
90	9 East Main Road, Middle	etown, RI 02842
3.	The state or other jurisdiction under the	he laws of which it is formed is RHODE ISLAND
4.	The name and address of its resident	agent is: BRIAN G. BARDORF
	130 BELLEVUE AVENUE NEWPOR	T RI 02840
5.	The current mailing address of the lin	nited liability company and the name or title of a person to whom communications
	may be directed are: John F. Nu	nes, Jr., 909 East Main Road, Middletown, RI 02842
6.	operating vineyard	of the business in which the limited liability company is actually engaged in this and winery
7.	If the limited liability company has ma Name	nagers, the name and address of each manager of the limited liability company  Address
Da	ted 10-1-0 (	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and
	<b>1</b> 1	that all statements contained herein are true and correct.
		Newport Vineyards and Winery, LLC
	8 0 9 1 1	Exact Name of Limited Liability Company
File	FOR SECRETARY OF STATE USE ONLY Date: 10-12-01	By John F. Nunes, Jr.
Che	ck No.: 6212	Operating Manager Title
By:	$\mathcal{J}_{\mathcal{A}}$ , $\mathcal{Z}$	Form No. 632 Revised 01/99

To be filed annually between September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

#### LIMITED LIABILITY COMPANY

ID	Number DLLC 86911	Annual Report for the year 2000
1,	The name of the limited liability company	is:
•	NEWPORT VINEYARDS AND WINERY	LLC
2.	The address of the principal office of the	ilmited liability company is:
	909 East Main Road, Midd	iletown, RI 02842
3.	The state or other jurisdiction under the la	aws of which it is formed is RHODE ISLAND
4.	The name and address of its resident ag	entis: BRIAN G. BARDORF
	130 BELLEVUE AVENUE NEWPORT R	1 02840
5.	The current mailing address of the limited	d liability company and the name or title of a person to whom communications
	may be directed are: John F. Num	es, Jr., 909 East Main Road, Middletown, RI 02842
6.	A brief statement of the character of the	e business in which the limited liability company is actually engaged in this
	state: Operating vineyard	and winery
7.	If the limited liability company has manag Name	gers, the name and address of each manager of the limited liability company  **Address**
	9-30-00	Under penalty of perjury, I declare and affirm that I have examined this

FOR SECRETARY OF STATE USE ONLY
File Date: //)-//o ~//

Check No.: 5075

By: AMA

report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

N	ewport Vineyards and Winery, LL	C
	Exact Name of Limited Liability Company	
Ву	DAR May	
	John F. Nunes, Jr. Operating Manager	
	Title	Form No. 622

Revised 01/99

Ву:

### To be filed annually between September 1 and November 1

Revised 01/99



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

ID	Number <u>LL 86911</u>	Annual Report for the year 1999
1.	The name of the limited liability company	is:
	NEWPORT VINEYARDS AND WINERY,	LLC
2.	The address of the principal office of the	limited liability company is:
	909 East Main Rd, Middleto	wn, RI 02842
3.	The state or other jurisdiction under the la	aws of which it is formed is RHODE ISLAND
4.	The name and address of its resident age	ent is: BRIAN G. BARDORF
	130 BELLEVUE AVENUE NEWPORT,	RI 02840
5.		d liability company and the name or title of a person to whom communications s, Jr., 909 East Main Road, Middletown, RI,02842
7.	state: Operating viney	e business in which the limited liability company is actually engaged in this eard and winery ers, the name and address of each manager of the limited liability company  Address
Dat	* 8 6 9 1 1 *	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.  Newport Vineyards and Winery, LLC  Exact Name of Limited Liability Company  A. A. M. M.
	FOR SECRETARY OF STATE USE ONLY Date: $9-29-99$	John F Nunes, Operating Manager
Chec	ok No.: 3633	Title
Bv:	AMF	Form No. 632



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

#### LIMITED LIABILITY COMPANY

	Emilied Elabiet 1 Comi Atti
ID	Number LL 86911 Annual Report for the year 1998
1.	The name of the limited liability company is:
	NEWPORT VINEYARDS AND WINERY, LLC
2.	The address of the principal office of the limited liability company is:  909 East Main Road, Middletown, RI 02842
3.	The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND
4.	The name and address of its resident agent is: BRIAN G. BARDORF
	47 LONG WHARF MALL NEWPORT, RI 02840
5.	The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:John F. Nunes, Jr., 909 East Main Road, Middletown, RI 0284
7.	A brief statement of the character of the business in which the limited liability company is actually engaged in this state:  Operating vineyard and winery.  If the limited liability company has managers, the name and address of each manager of the limited liability company Name  Address
Da	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.  Newport Vineyards and Winery, LLC  Exact Name of Limited Liability Company
ile	FOR SECRETARY OF STATE USE ONLY Date: 9:30.98  By JAMES M.
	Operating Manager
Зу.	Title

Form No. LLC-19 Revised 8/97

## State of Rhode Island and Providence Plantations

Office of the Secretary of State Corporation Division 100 North Main Street Providence, RI 02903-1335

LLC I.D. #8	Annual Report for the year
FIRST:	The name of the limited liability company is:  Newport Vineyards and Winery, LLC
SECOND:	The address of the principal office of the limited liability company is:  909 East Main Road, Middletown, RI 02842
THIRD:	The state or other jurisdiction under the laws of which it is formed is: Rhode_Island
FOURTH:	The name and address of its resident agent is:  Brian G. Bardorf, 47 Long Wharf Mall, Newport, RI 02840
FIFTH:	The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:  John F. Nunes, Jr., 909 East Main Road, Middletown, RI 02842
<b>SIXTH:</b>	A brief statement of the character of the business in which the corporation is actually engaged in this state:  Operating vineyard and winery
Dated. /D	Newport Vineyards and Winery, LLC (  Exact Name of Limited Liability Company
1355	PAID OCT 1 6 1907 By 17 Maylor
OAB	SECRETARY OF STATE Title John F. Nunes, Ir. Operating Manager

<sup>\*</sup>To be signed in the manner required by the home state.

# State of Rhode Island and Providence Plantations Office of the Secretary of State Corporation Division 100 North Main Street Providence, Rt 02903-1335

LLC I.D. #81	Annual Report for the year1996
FIRST:	The name of the limited liability company is:
	Newport Vineyards and Winery, LLC
SECOND:	The address of the principal office of the limited liability company is:
	909 East Main Road, Middletown, RI, 02842
THIRD:	The state or other jurisdiction under the laws of which it is formed is:  Rhode Island
FOURTH:	The name and address of its resident agent is: Brian G. Bardorf, 47 Long Wharf Mall, Newport, RI, 02840
FIFTH:	The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:  John F. Nunes, Jr., 909 East Main Road, Middletown, RI, 02842
SIXTH:	A brief statement of the character of the business in which the corporation is actually engaged in this state:  Operating vineyard and winery
Dated	1997 Newport Vineyards and Winery, LLC  Exact Name of Limited Liability Company
By	FILED John F. Nunes, Jr., Operating Manager

<sup>\*</sup>To be signed in the manner required by the home state.