



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

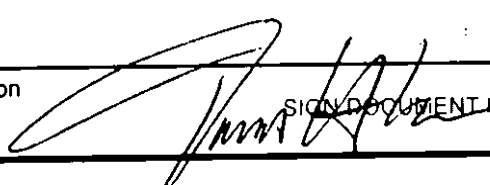
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FOR
SECRETARY OF STATE
USE ONLY

Annual Report for the year: **2018**

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 1256283		2. Exact name of the Limited Liability Company Commuter Yacht, LLC			
3. NAICS Code 1336011		4. Brief description of the character of business conducted in Rhode Island to design, build and sell semi-custom and custom motor yachts			
5. State of Formation RI					
6. Principal Office Address 32 Clarke St.		City Newport		State RI	Zip 02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Walter S. Szot			Contact Title Member		
Street Address 617 Fleming St., #8			City Key West	State FL	Zip 33040
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment ☐					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
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 Person James G. Ewing				Date AUG 28 - 2018	
Signature of Authorized Person 				SIGN DOCUMENT 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

FILED

SEP 05 2018

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