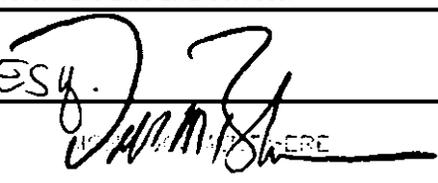




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Annual Report for the year: 2018
Limited Liability Company

- 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 000116702 | | 2 Exact name of the Limited Liability Company Barrows & Townsend Maritime, LLC | | | |
| 3 NAICS Code 99999 | | 4. Brief description of the character of business conducted in Rhode Island Maritime Trades | | | |
| 5 State of Formation Rhode Island | | | | | |
| 6. Principal Office Address 3852 Main Road | | City Tiverton | State RI | Zip 02878 | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | | |
| Contact Name John T. Fowler | | | Contact Title Manager | | |
| Street Address 3852 Main Road | | City Tiverton | State RI | Zip 02878 | |
| 8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS | | | | | |
| Manager Name John T. Fowler | | | Manager Name | | |
| Street Address 10 William Street | | | Street Address | | |
| City Rumson | State NJ | Zip 07760 | City | State | Zip |
| Manager Name | | | Manager Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| 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 David M. Bohannon, Esq. | | | | Date 10/12/18 | |
| Signature of Authorized Person  | | | | | |

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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OCT 15 2018

KIM

BY 5891 FORM 632 - Revised: 10/2017