RI SOS Filing Number: 201880639100 Date: 10/31/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

**STAMP** 

<b>Annual</b>	Report for the year:	201
	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.

FOR SECRETARY OF STATE

·						
	Brief description of the character of business conducted in Rhode Island     PURCHASE AND OPERATION OF SAILING VESSELS OF ALL KINDS AND DESCRIPTIONS					
6. Principal Office Address 38 BELLEVUE AVENUE, SUITE H		State RI	Zip 02840			
7 Mailing Address of Limited Liability Company and Name or T Contact Name JEFFREY K. GRONNING			Contact Title MEMBER			
Street Address 124 MOSLE ROAD			Zip 07931			
8. List ALL managers (names and addresses) of the Limited Lia Manager Name			ability Company, IF APPLICABLE - DO NOT LIST MEMBERS  Manager Name			
Street Address			Street Address			
Zip	City	State	Zıp			
<b> </b>	Manager Name		<del>,</del>			
Street Address			Street Address			
Zip	City	State	Zıp			
		Check the box to a	indicate an attachment			
irm that I have	examined this report, includin					
		Date 9/2	5/18			
SIG	N DOCUMENT HERE					
1	nation is currently irm that I have ined herein are	Street Address  Zip City  nation is currently of record with the Department of Sta	Street Address  Zip City State  Check the box to a mation is currently of record with the Department of State. Changes require filing firm that I have examined this report, including any accompanying ined herein are true and correct.  Date 9/2			

**Division of Business Services** 

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

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

OCT 3 1 2018

FORM 632 - Revised 19/2017