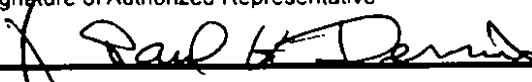




State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2019
Corporation

- 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 ID Number 69675		2. Exact name of the Corporation WARREN RIVER BOATWORKS, INC.												
3. Principal Office Address 66 Church Street (Mail: P.O. Box 202)			City Warren	State RI	Zip 02885									
4. NAICS Code 336612		6. Brief description of the character of business conducted in Rhode Island Building, launching, hauling, storing, servicing and repairing of boats.												
5. State of Incorporation RI														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name Paul H. Dennis			Vice-President Name Paul H. Dennis											
Street Address P.O. Box 202			Street Address P.O. Box 202											
City Warren	State RI	Zip 02885	City Warren	State RI	Zip 02885									
Secretary Name Paul H. Dennis			Treasurer Name Paul H. Dennis											
Street Address P.O. Box 202			Street Address P.O. Box 202											
City Warren	State RI	Zip 02885	City Warren	State RI	Zip 02885									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name Paul H. Dennis			Director Name None											
Street Address P.O. Box 202			Street Address											
City Warren	State RI	Zip 02885	City	State	Zip									
Director Name None			Director Name None											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>											
This information is currently of record in the Department of State. Changes require an additional filing.			<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:33%;">NUMBER OF SHARES</th> <th style="width:33%;">CLASS/SERIES</th> <th style="width:33%;">PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>Common</td> <td>No Par Value</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	Common	No Par Value			
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE									
100	Common	No Par Value												
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. <i>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.</i>														
Name of Authorized Representative Paul H. Dennis, President			Date 1/23/19											
Signature of Authorized Representative 			SIGN DOCUMENT HERE FILED FEB 01 2019 3648											

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