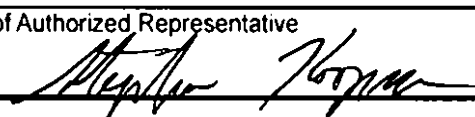




Department of State - Business Services Division

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 136597		2. Exact name of the Corporation Stephen Koopman, Inc.			
3. Principal Office Address 515 Narragansett Parkway		City Warwick		State RI	Zip 02888
4. NAICS Code 541310		6. Brief description of the character of business conducted in Rhode Island To engage in naval architecture, including yacht structural design.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Stephen Koopman		Vice-President Name None			
Street Address 515 Narragansett Parkway		Street Address			
City Warwick	State RI	Zip 02888	City	State	Zip
Secretary Name Stephen Koopman		Treasurer Name Stephen Koopman			
Street Address 515 Narragansett Parkway		Street Address 515 Narragansett Parkway			
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 028882
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Stephen Koopman		Director Name			
Street Address 515 Narragansett Parkway		Street Address			
City Warwick	State RI	Zip 02888	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. Shares Authorized					
This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment ☐			
		NUMBER OF SHARES 100	CLASS/SERIES Common	PAR VALUE No par	
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. 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 Representative Stephen Koopman				Date 2-20 , 2019	
Signature of Authorized Representative  SIGN DOCUMENT HERE					

FILED