



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.

FILED


STAMP

FEB 27 2019

FOR

BY

1812 DS

| 1. Entity ID Number 000156697 | | 2. Exact name of the Corporation Ronstan International, Inc. | | | | | | | | | | | | |
|---|--------------------|--|---|--------------------|-----------------------------|------------------|--------------|-----------|-----|--------|------------|--|--|--|
| 3. Principal Office Address 45 High Point Avenue | | City Portsmouth | | State RI | Zip 02871 | | | | | | | | | |
| 4. NAICS Code 336999 | | 6. Brief description of the character of business conducted in Rhode Island Manufacture, sale, and distribution of sail boat hardware | | | | | | | | | | | | |
| 5. State of Incorporation Rhode Island | | | | | | | | | | | | | | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/> | | | | | | | | | | | | | | |
| President Name Scot West | | | Vice-President Name Alan Prussia | | | | | | | | | | | |
| Street Address 45 High Point Avenue | | | Street Address 45 High Point Avenue | | | | | | | | | | | |
| City Portsmouth | State RI | Zip 02871 | City Portsmouth | State RI | Zip 02871 | | | | | | | | | |
| Secretary Name Jan Weatherby | | | Treasurer Name Jane Weatherby | | | | | | | | | | | |
| Street Address 45 High Point Avenue | | | Street Address 45 High Point Avenue | | | | | | | | | | | |
| City Portsmouth | State RI | Zip 02871 | City Portsmouth | State RI | Zip 02871 | | | | | | | | | |
| 8. List ALL directors (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/> | | | | | | | | | | | | | | |
| Director Name Alistair Murray | | | Director Name Graham Cunningham | | | | | | | | | | | |
| Street Address 45 High Point Avenue | | | Street Address 45 High Point Avenue | | | | | | | | | | | |
| City Portsmouth | State RI | Zip 02871 | City Portsmouth | State RI | Zip 02871 | | | | | | | | | |
| Director Name Laine McCooke | | | Director Name Louis Sander | | | | | | | | | | | |
| Street Address 45 High Point Avenue | | | Street Address 45 High Point Avenue | | | | | | | | | | | |
| City Portsmouth | State RI | Zip 02871 | City Portsmouth | State RI | Zip 02871 | | | | | | | | | |
| 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 <input type="checkbox"/> | | | | | | | | | | | | |
| | | <table border="1"><thead><tr><th>NUMBER OF SHARES</th><th>CLASS/SERIES</th><th>PAR VALUE</th></tr></thead><tbody><tr><td>100</td><td>Common</td><td>\$0.01 Par</td></tr><tr><td></td><td></td><td></td></tr></tbody></table> | | | | NUMBER OF SHARES | CLASS/SERIES | PAR VALUE | 100 | Common | \$0.01 Par | | | |
| NUMBER OF SHARES | CLASS/SERIES | PAR VALUE | | | | | | | | | | | | |
| 100 | Common | \$0.01 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 Scot West | | | | | Date 16 JAN, 2019 | | | | | | | | | |
| Signature of Authorized Representative  SCOT P WEST, MANAGING DIRECTOR/PRESIDENT | | | | | | | | | | | | | | |

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

FORM 630 - Revised: 10/2017

RONSTAN INTERNATIONAL, INC.

Corporate ID: 000156697

2019 Annual Report

Secretary of State

Continuation Sheet

OFFICERS:

Chief Executive Officer

Brendon Anderson

45 High Point Avenue

Portsmouth, RI 02871

DIRECTORS:

Scot West

45 High Point Avenue

Portsmouth, RI 02871

Ronstan AR Addendum

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