Annual Report for the year: 2019 **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 911674	1	2. Exact name of the Limited Liability Company Heartbreaker Sailing, LLC				
3. NAICS Code	4. Brief des	Brief description of the character of business conducted in Rhode Island				
551112	Holding C	Holding Company				
5. State of Formation	\neg					
Rhode Island						
6. Principal Office Address			City	State	Zıp	
77 Dr. Marcus Wheatland Blvd.			Newport	RI	02840	
7. Mailing Address of Limited	Liability Compa	any and Name o	r Title of Contact Person	_		
Contact Name Robert L. Hughes			Contact Title			
Street Address 1 Ionia Avenue, SW Suite 300			City Grand Rapids	State MI	^{Zip} 04503	
8. List ALL managers (names	and addresses	s) of the Limited	Liability Company, IF APPLICABI	E - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
Manager Name	· · · · · · · · · · · · · · · · · · ·		Manager Name	•		
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
		1		Check the box to	indicate an attachment	
9. Resident Agent in Rhode Is	land This inform	nation is currently	of record with the Department of State	e. Changes require filii	ng Form 642	
Under penalty of perjury, I o statements, and that all sta			examined this report, including true and correct.	any accompanyin	ng schedules and	
Name of Authorized Person				Date		
hobert thinks				10-2-19		
Signature of Authorized Person	Hasher	.96	N DOCHMULT HERT	1		
	//		FILED			

MAIL TO:

Division of Business Services

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

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

OCT 0 7 2019 VM