s s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
HOPE	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	treet 04-2615	
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2019			
1. ID No. <u>000129196</u>			
2. Exact Name of the Limited Liability Company Wapping Road Winery, LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>312130</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
WINERY			
5. Principal Office Address			
No. and Street: <u>582 WAPPING ROAD</u>			
City or Town: PORTSMOUTH State: RI Zip: 02871 Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>NANCY PARKER WILSON</u> Contact Title: <u>GENERAL MANAGER</u> No. and Street: <u>GREENVALE VINEYARDS</u> 582 WAPPING ROAD			
City or Town: PORTSMOUTH State: RI Zip: 02871 Country: USA			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip	Code, Country
MANAGER	NANCY PARKER WILSON	582 WAPPING RO PORTSMOUTH, RI 0287	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

NANCY PARKER WILSON GREENVALE VINEYARDS 582 WAPPING ROAD PORTSMOUTH, RI 02871

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 29 Day of October, 2019 at 4:16:31 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>NANCY PARKER WILSON</u> Signature of Authorized Person

Form No. 632 Revised 09/07

 $\ensuremath{\textcircled{\sc 0}}$ 2007 - 2019 State of Rhode Island and Providence Plantations All Rights Reserved