



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

FILED

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BY

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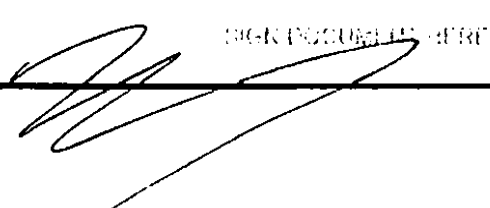
Annual Report for the year: **2019**

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 505077		2. Exact name of the Limited Liability Company SHORELINK PUBLICATIONS, LLC			
3. NAICS Code 511199		4. Brief description of the character of business conducted in Rhode Island Marine Publications			
5. State of Formation Rhode Island					
6. Principal Office Address 31 West Street			City Newport	State RI	Zip 02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Anne Vandromme			Contact Title Manager		
Street Address 31 West Street			City Newport	State RI	Zip 02871
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Anne Vandromme			Manager Name		
Street Address 31 West Street			Street Address		
City Newport	State RI	Zip 02840	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island This information is currently of record with the Department of State. Changes require filing Form 642					
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 Person ANNE VANDROMME				Date 11-5-19	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

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

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