RI SOS Filing Number: 202033124360 Date: 1/21/2020 4:00:00 PM

(DG)
(43)

State of Rhode Island, and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2020

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	STA
JAN 2 1 2020	Ø,

Entity ID Number	2. Exact nam	2. Exact name of the Corporation						
100621	Cockeas	Cockeast Fisheries, Inc.						
3. Principal Office Address	cipal Office Address				State	Zip		
50 Mullin Hill Road			Little Comp	oton	RI	02837		
4. NAICS Code	6. Brief descr	6. Brief description of the character of business conducted in Rhode Island						
336611	Commercia	Commercial fishing operations, the marketing of seafood						
5. State of Incorporation								
RI								
7. List ALL officers (names and	d addresses)	·	Tit o	Chec	k the box to in	dicate an attachment 🔲		
President Name Charles R. Borden			Vice-President Name David V. D. Borden					
Street Address 50 Mullin Hill Road			Street Address 38D Mullin Hill Road					
City Little Compton	State RI	^{Zip} 02837	City Little Compton		State RI	^{Zip} 02837		
Secretary Name Edith S. Borde				Treasurer Name Charles R. Borden				
Sweet Address 38D Mullin Hill Road			Street Address 50 Mullin Hill Road					
City Little Compton	State RI	^{Zip} 02837	City Little Compton		State RI	^{Zip} 02837		
8. List ALL directors (names a	nd addresses)	···			k the box to in	dicate an attachment 🔲		
Director Name Charles R. Borden		Director Name Edith S. Borden						
Street Address 50 Mullin Hill Road			Street Address 38D Mullin Hill Road					
City Little Compton	State RI	^{Zip} 02837	City Little Compton		State RI	^{Zip} 02837		
Director Name David V. D. Borden			Director Name None					
Street Address 38D Mullin Hill Road			Street Address					
City Little Compton	State RI	Zip 02837	City		State	Zip		
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachmen						
This information is currently of Department of State.	record in the		NUMBER OF SHARES		No Par Value			
Changes require an additional filing.		100		Common		No Par Value		
Cuanges reduire an accidonal i	nung.	l l						
11. This report must be execut					poration is in the	ne hands of a receiver or		
trustee, this report must be ex Under penalty of perjury, I d	leclare and affirm	that I have examin	ned this report,		mpanying so	hedules and		
statements, and that all state Name of Authorized Represent		nerein are true al	па сог <u>увс</u> т.		Date /	. /		
Charles R. Borden					1 1/1	4/20		
Signature of Authorized Repre	sentative	SIGN DO	CUMENT HERE		-	<u> </u>		
		_						

MAIL TO: Division of Business Services

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

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