	State of Rhode Office of the Secret		Fee: \$50.00	
	Division Of Busines			
	148 W. River Street Providence RI 02904-2615			
HORE	(401) 222-30			
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: 2020				
1. ID No. <u>001676461</u>				
2. Exact Name of the Limited Liability Company The Oar Newport 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>531110</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
REAL ESTATE RENTAL				
5. Principal Office Addre	SS			
No. and Street: 395 WOLCOTT AVENUE				
		ate: <u>RI</u> Zip: <u>02842</u> 0	Country: <u>USA</u>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Contact				
	<u>QUIDNECK AVE STE 2E</u> <u>_ETOWN</u>	State: <u>RI</u> Zip: <u>02842</u>	Country: <u>US</u>	
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name	Address	5	
	First, Middle, Last, Suffix	Address, City or Town, State	, Zip Code, Country	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER				

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

NICOLE R. GRAY, CPA NICOLE R. GRAY & ASSOCIATES 747 AQUIDNECK AVE., SUITE 2E MIDDLETOWN , RI 02842

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

**Signed this 5 Day of October, 2020 at 12:03:48 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>NICOLE R. GRAY, CPA</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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