

FILE

Annual Report for the year: 2020 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.

	OCT 05 2020 ,
BY_	19912
	レン

Entity ID Number	2. Exact name	2. Exact name of the Limited Liability Company					
000540679	Zephyr Ports	Zephyr Portsmouth, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
713930	The Limited Liability Company has the purpose of engaging in leisure travel in marinas						
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zıp		
304 Church Pond Road			Tiverton	RI	02878		
7. Mailing Address of Limited L		and Name or Titl					
Contact Name Terence W. Coni	roy, Jr.		Contact Tille Manager				
Street Address 104 Page Street,	Suite 2		City Stoughton	State MA	Zip 02072		
8. List ALL managers (names		of the Limited Liab	oility Company, IF APPLICA	BLE - DO NOT LIST M	EMBERS		
Manager Name Terence W. Conroy, Jr.			Manager Name				
Street Address 104 Page Street, Suite 2			Street Address				
City Stoughton	State MA	Z <sub>1P</sub> 02072	City	State	Zip		
Manager Name		<del> </del>	Manager Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zip		
		·		Check the box to in	dicate an attachment		
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.							
Under penalty of perjury, I destatements, and that all state				ng any accompanying	schedules and		
Name of Authorized Person	Date	Date					
Terence W/Controy, ir.				9/25/20	9/25/20		
Signature/of Averborized Perso	n						

MAIL TO:

**Division of Business Services** 

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

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