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State of Rhode Island
Department of State - Business Services Division

FILED
OCT 28 2020
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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.

1. Entity ID Number	2. Exact name of the Limited Liability Company		
93751	The Kayak Centre at Wickford Cove, LLC		
3. NAICS Code: 451110	4. Brief description of the character of business conducted in Rhode Island: Retail Sales		
5. State of Formation: Rhode Island			
6. Principal Office Address: 631 Jefferson Boulevard	City: Warwick	State: RI	Zip: 02886

7 Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name: Mitchell S. Riffkin	Contact Title: Attorney		
Street Address: 631 Jefferson Boulevard	City: Warwick	State: RI	Zip: 02886

8. List **ALL** managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name: Jeffrey B. Shapiro			Manager Name: Debora W Shapiro		
Street Address: 125 Pleasant Street			Street Address: 187 Eighth Street, Unit 721		
City: Wickford	State: RI	Zip: 02852	City: Charlestown	State: MA	Zip: 02129
Manager Name: MATTHEW BOSCHEFF			Manager Name: RACHEL McCARTY		
Street Address: 70 Brown St			Street Address: 70 Brown St		
City: North Kingstown	State: RI	Zip: 02852	City: North Kingstown	State: RI	Zip: 02852

Check the box to indicate 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 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: Jeffrey B. Shapiro	Date: 10-20-20
Signature of Authorized Person	

MAIL TO:
Division of Business Services
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