| | State of Rhode Office of the Secreta | | Fee: \$50.00 |
|---|---|------------------------|--------------------------|
| | Division Of Business | Services | |
| 148 W. River Street Providence RI 02904-2615 | | | |
| HORE | (401) 222-304 | | |
| Limited Liebility Com | 2021 | | |
| 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>001682530</u> | | | |
| 2. Exact Name of the Limited Liability Company <u>APOGEE YACHT SERVICES LLC</u> | | | |
| 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 here. More information on NAICS can be found online. | | | |
| <u>999999</u> | | | |
| 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island | | | |
| | | | |
| YACHTING SERVICES, INCLUDING CREWING ON VESSELS AND MAINTENANCE SERVICES. | | | |
| 5. Principal Office Addre | SS | | |
| No. and Street: P. | O. BOX 328 | | |
| City or Town: <u>B</u> | RISTOL State: <u>ME</u> | Zip: <u>04539</u> | Country: <u>USA</u> |
| 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: | | | |
| Contact Name: Contact Title: | | | |
| | O. BOX 328 RISTOL State: ME | Zip: 04539 | 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 | Ad | dress |
| | 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

LEGALINC CORPORATE SERVICES INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

Signed this 30 Day of October, 2020 at 1:12:44 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 KATHERINE KLINGELHOFER

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved