State of Rhode Island
Department of State - Business Services Division

FILED STAMP
OCT 30 2020 FOR SECRETARY OF STATE USE ONLY
BY 1317 DS

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		
000124311	SHANOMET COMPANY, LLC		
3 NAICS Code	4. Brief description of the character of business conducted in Rhode Island		
812990	Ownership and management of sailing vessels of all kinds		
5. State of Formation			
Rhode Island			
6. Principal Office Address	City	State	Zip
15 Poplar Street	Newport	RI	02840
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Anthony M. Iacono	Contact Title Member		
Street Address 15 Poplar Street	City Newport	State RI	Zip 02840

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

Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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	Date
Anthony M. Iacono	10/6/20
Signature of Authorized Person	

MAIL TO:
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