



State of Rhode Island

Department of State - Business Services Division

FILED

STAMP

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 30 2020

FOR
SECRETARY OF
STATE ONLY

BY

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DS

1. Entity ID Number 000683556		2. Exact name of the Limited Liability Company ROGCRU LLC			
3. NAICS Code 812990		4. Brief description of the character of business conducted in Rhode Island Boats			
5. State of Formation Rhode Island					
6. Principal Office Address PO Box 1463			City Richmond	State VA	Zip 23218
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Beverley Crump			Contact Title Member		
Street Address c/o Thompson McMullan, 100 Shockoe Slip, Fl. 3			City Richmond	State VA	Zip 23219
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 <input type="checkbox"/>					
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 Beverley Crump				Date Oct 3, 2020	
Signature of Authorized Person <i>Beverley L. Crump</i>					

MAIL TO:

Division of Business Services

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