



State of Rhode Island

Department of State - Business Services Division

FILED

STAMP

Annual Report for the year: 2020

Limited Liability Company

OCT 30 2020

FOR
SECRETARY OF STATE
USE ONLY

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

BY

1314
DS

1. Entity ID Number 000144072		2. Exact name of the Limited Liability Company NEW WAVE, LLC			
3. NAICS Code 812990		4. Brief description of the character of business conducted in Rhode Island Ownership and operation of sailing and power vessels of all kinds			
5. State of Formation Rhode Island					
6. Principal Office Address Admiral's Gate Tower, 221 Third St., Suite 510			City Newport	State RI	Zip 02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Tom Curren Painting, Inc./Thomas Curren			Contact Title Manager		
Street Address 82 Winter Street			City Lincoln	State MA	Zip 01773
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Thomas Curren			Manager Name		
Street Address 82 Winter Street			Street Address		
City Lincoln	State MA	Zip 01773	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 Thomas Curren				Date Oct 13 2020	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov