



State of Rhode Island  
**Department of State - Business Services Division**

**Annual Report for the year: 2021**  
**Corporation**

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

**FILED**

FEB 03 2021  
 5700

1. Entity ID Number 14941		2. Exact name of the Corporation New England Airlines, Inc.			
3. Principal Office Address 56 Airport Road			City Westerly	State RI	Zip 02891
4. NAICS Code 561599		6. Brief description of the character of business conducted in Rhode Island Air charter service, commercial airline, scheduled flights to and from Block Island, RI (All other Travel Arrangement & Reservation Services)			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name William G. Bendokas			Vice-President Name William G. Bendokas		
Street Address 66 Elm Street #21			Street Address 66 Elm Street #21		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Secretary Name William G. Bendokas			Treasurer Name William G. Bendokas		
Street Address 66 Elm Street #21			Street Address 66 Elm Street #21		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name m G. Bendokas			Director Name		
Street Address 66 #21 Elm Street			Street Address		
City Westerly	State RI	Zip 02891	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.			10. Shares Issued		
			NUMBER OF SHARES 100	CLASS/SERIALS	PAR VALUE
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. <b>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.</b>					
Name of Authorized Representative William G. Bendokas				Date 1/29/2021	
Signature of Authorized Representative  					

MAIL TO:  
 Division of Business Services  
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