

State of Rhode Island and Providence Plantations
Department of State - Business Services Division

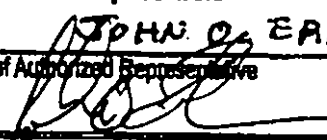
Annual Report for the year:
Corporation

- 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 25 2021

BY

1. Entity ID Number 33592		2. Exact name of the Corporation YACHT SALES, LTD.	
3. Principal Office Address 31 GRANT DRIVE		City NORTH KINGSTON	State RI Zip 02852
4. NAICS Code 441222	5. Brief description of the character of business conducted in Rhode Island BOAT SALES		
6. State of Incorporation R.I.			
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name JOHN O. ERIKSON		Vice-President Name BEVERLY A. ERIKSON	
Street Address 31 GRANT DRIVE		Street Address 31 GRANT DRIVE	
City NORTH KINGSTON	State RI Zip 02852	City NORTH KINGSTON	State RI Zip 02852
Secretary Name BEVERLY A. ERIKSON		Treasurer Name BEVERLY A. ERIKSON	
Street Address 31 GRANT DRIVE		Street Address 31 GRANT DRIVE	
City NORTH KINGSTON	State RI Zip 02852	City NORTH KINGSTON	State RI Zip 02852
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐			
Director Name JOHN O. ERIKSON		Director Name	
Street Address 31 GRANT DRIVE		Street Address	
City NORTH KINGSTON	State RI Zip 02852	City	State Zip
Director Name		Director Name	
Street Address		Street Address	
City	State Zip	City	State Zip
9. Shares Authorized This information is currently of record to the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment ☐	
		Number of shares 300	CLASSIFICATION COMMON PAR VALUE NO 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. 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 Representative JOHN O. ERIKSON		Date 2/11/21	
Signature of Authorized Representative 		PRO YACHT SALES LTD	