



State of Rhode Island

Department of State - Business Services Division

 RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

STAMP

Annual Report for the year: **2018**

Limited Liability Company

2021 MAY 10 AM 11:30

→ 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 000140748		2. Exact name of the Limited Liability Company MIGRANT, LLC			
3. NAICS Code 487210		4. Brief description of the character of business conducted in Rhode Island MANAGEMENT OF A MOTOR VESSEL			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 189 Narragansett Blvd			City Portsmouth	State RI	Zip 02871
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Francis Lee Davidson			Contact Title Manager		
Street Address 189 Narragansett Blvd			City Portsmouth	State RI	Zip 02871
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Francis Lee Davidson			Manager Name		
Street Address 189 Narragansett Blvd			Street Address		
City Portsmouth	State RI	Zip 02871	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.					
<i>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.</i>					
Name of Authorized Person Francis Lee Davidson				Date 5.7.21	
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

FILED

MAY 10 2021

BY

2021
A.A. V. A.M.

FORM 632 - Revised: 08/2020