



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

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

1. Entity ID Number <b>001081128</b>	2. Exact name of the Limited Liability Company <b>BLUEWATER POOL SERVICE, LLC</b>		
3. NAICS Code 561790	4. Brief description of the character of business conducted in Rhode Island SWIMMING POOL SERVICE, MAINTENANCE, & CONSULTING. PRIMARILY FOCUSING ON WATER QUALITY, PLUMBING AND INTEGRITY OF THE SWIMMING POOL SYSTEM AS A WHOLE. DO NOT BUILD OR CONSTRUCT POOLS/AQUATIC FEATURES.		
5. State of Formation RI			
6. Principal Office Address 45 GLEN MEADOWS DRIVE		City PAWTUCKET	State RI
		Zip 02861	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name CHRISTOPHER SUTHERLAND		Contact Title OWNER	
Street Address 45 GLEN MEADOWS DRIVE		City PAWTUCKET	State RI
		Zip 02861	
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.			
<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 CHRISTOPHER SUTHERLAND			Date 9/21/2021
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

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