State of Rhode Island
Department of State - Business Services Division

FILED
DEC 22 2021
BY

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	2. Exact name of the Limited Liability Company		
0001018604	**Old Island Pub LLC**		
3. NAICS Code 722513	4. Brief description of the character of business conducted in Rhode Island Pub		
5. State of Formation RI			
6. Principal Office Address Ocean Avenue	City Block Island	State RI	Zip 02807

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name Lewis N. Gaffett	Contact Title Managing Member		
Street Address PO Box 20, Ocean Avenue	City Block Island	State RI	Zip 02807

8 List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name Lewis N. Gaffett			Manager Name		
Street Addre:			Street Address		
City B			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.

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	Date
Lewis N. Gaffett	12/17/21
Signature of Authorized Person Lewis N. Gaffett	

MAIL TO:
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