



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: **2023**  
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

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BUS SVCS DIVISION

2023 FEB 27 A 11:15

|   |                    |   |   |                               |                            |
|---|--------------------|---|---|-------------------------------|----------------------------|
| 1. Entity ID Number<br><b>000515184</b>   |                    | 2. Exact name of the Corporation<br><b>Narragansett Inn New Harbour, Inc.</b>   |   |                               |                            |
| 3. Principal Office Address<br><b>42 Manville Road</b>  |                    |   | City<br><b>Manville</b>   | State<br><b>RI</b>            | Zip<br><b>02838</b>        |
| 4. NAICS Code<br><b>722511</b>  |                    | 6. Brief description of the character of business conducted in Rhode Island<br><b>Operation of an Inn, Restaurant, Cafe and Cocktail Lounge</b> |   |                               |                            |
| 5. State of Incorporation<br><b>Rhode Island</b>  |                    |   |   |                               |                            |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                    |   |   |                               |                            |
| President Name<br><b>James Mott</b>   |                    |   | Vice-President Name<br><b>James Mott</b>  |                               |                            |
| Street Address<br><b>42 Manville Road</b>   |                    |   | Street Address<br><b>42 Manville Road</b>   |                               |                            |
| City<br><b>Manville</b>   | State<br><b>RI</b> | Zip<br><b>02838</b>   | City<br><b>Manville</b>   | State<br><b>RI</b>            | Zip<br><b>02838</b>        |
| Secretary Name<br><b>James Mott</b>   |                    |   | Treasurer Name<br><b>James Mott</b>   |                               |                            |
| Street Address<br><b>42 Manville Road</b>   |                    |   | Street Address<br><b>42 Manville Road</b>   |                               |                            |
| City<br><b>Manville</b>   | State<br><b>RI</b> | Zip<br><b>02838</b>   | City<br><b>Manville</b>   | State<br><b>RI</b>            | Zip<br><b>02838</b>        |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                    |   |   |                               |                            |
| Director Name<br><b>James Mott</b>  |                    |   | Director Name<br><b>George Mott</b>   |                               |                            |
| Street Address<br><b>42 Manville Road</b>   |                    |   | Street Address<br><b>323 Redwood Lane</b>   |                               |                            |
| City<br><b>Manville</b>   | State<br><b>RI</b> | Zip<br><b>02838</b>   | City<br><b>Cheshire</b>   | State<br><b>CT</b>            | Zip<br><b>06410</b>        |
| Director Name<br><b>John Mott</b>   |                    |   | Director Name   |                               |                            |
| Street Address<br><b>PO BOX 355</b>   |                    |   | Street Address  |                               |                            |
| City<br><b>Block Island</b>   | State<br><b>RI</b> | Zip<br><b>02807</b>   | 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.<br><br>Changes require an additional filing.  |                    |   | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |                               |                            |
|   |                    |   | NUMBER OF SHARES<br><b>600</b>  | CLASS/SERIES<br><b>Common</b> | PAR VALUE<br><b>No Par</b> |
| 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<br><b>James Mott</b>  |                    |   |   |                               | Date<br><b>2-16-2023</b>   |
| Signature of Authorized Representative<br><i>James Mott</i>   |                    |   |   |                               |                            |

MAIL TO:  
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