



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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R.I. DEPT. OF STATE
BUS SVCS DIV

2023 APR 20 A 8:48

1. Entity ID Number 000898586		2. Exact name of the Corporation Pawtuxet Cove Marina, Inc.			
3. Principal Office Address 69 R Fort Avenue			City Cranston	State RI	Zip 02905
4. NAICS Code 493190	6. Brief description of the character of business conducted in Rhode Island operate a marina				
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Dack Patriarca			Vice-President Name Claire Giannamore		
Street Address 116 Orange Street			Street Address 116 Orange Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Dack Patriarca			Treasurer Name Dack Patriarca		
Street Address 116 Orange Street			Street Address 116 Orange Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			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 Dack Patriarca				Date 3/13/23	
Signature of Authorized Representative 					

FILED

APR 20 2023
BY ML 1829