



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
Limited Liability Company

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED
MAR 04 2024
BY *[Signature]* 2058

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|---|--|---|-------------|
| 1. Entity ID Number 000962150 | | 2. Exact name of the Limited Liability Company HMSF LLC | |
| 3. NAICS Code 000962150 | | 4. Brief description of the character of business conducted in Rhode Island Owner of a private yacht for general maritime purposes | |
| 5. State of Formation Rhode Island | | | |
| 6. Principal Office Address 428 Childers Street | | City Pensacola | State FL |
| Zip 32534 | | | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name Harvey M S Fraser | | Contact Title Member | |
| Street Address PO Box 2428 PMB #25242 | | City Pensacola | State FL |
| Zip 32513 | | | |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642. | | | |
| 9. 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 Harvey M S Fraser | | Date 2/26/2024 | |
| Signature of Authorized Person <i>[Handwritten Signature]</i> | | | |

MAIL TO:
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