| State of Rhode Island       Fee: \$50.00         Office of the Secretary of State       Division Of Business Services         148 W. River Street       Providence RI 02904-2615         (401) 222-3040       Company         Annual Report       Filing Period: February 1 - May 1         In accordance with RI.G.L. 7-16-66(04), each limited liability company failing or reducing to life its annual report within thirty (30) days after the time prescribed by law (RI.G.L. 7-16-66(056)) is subject to a penalty fee of \$26.00.         ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024       Company         1. ID No.       001678018         2. Exact Name of the Limited Liability Company Fairwinds Marina, LLC       State: RI         3. State of Formation       State: RI         State: RI       NAICS CODE         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.         531390       State: RI         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         HOLD AND MANAGE REAL ESTATE         5. Principal Office Address         No. and Street:       2 SEMINOLE ST         Cintact Name: Contact Title:       No. and Street:       5 SMEMORIAL BLVD         No. and Street:       2 SEMINOLE ST       Contact Preson: <th></th> <th></th>   |  |  |
|---|--|--|
| 148 W. River Street<br>Providence RI 02904-2615<br>(401) 222-3040         Sumited Liability Company<br>Annual Report<br>Piling Ponod: February 1 - May 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or<br>relusing to file its annual report within thirty (30) days after the ime presented by<br>law (R.I.G.L. 7-16-66(bc)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024         1. ID No. 001678018         2. Exact Name of the Limited Liability Company Fairwinds Marina, LLC         3. State of Formation<br>State: RI         NAICS CODE         Enter the six digit NAICS Code that best describes the primary business conducted by the entity.<br>Download the list of codes here, More information on NAICS can be found online.         531390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode<br>Island         HOLD AND MANAGE REAL ESTATE         5. Principal Office Address         No. and Street: <u>2 SEMINOLE ST</u><br>City or Town:       YuRWICK       State: RI       Zip: 02889       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Title:<br>No. and Street:       S State: RI       Zip: 02840       Country: USA         State: RI< Zip: 02840  |  |  |
| Providence RI 02904-2615<br>(401) 222-3040         Limited Liability Company<br>Annual Report         Filing Period: February 1 - May 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or<br>relasing to file its annual report within thirty (30) days after the time prescribed by<br>law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024         1. ID No.       001678018         2. Exact Name of the Limited Liability Company Fairwinds Marina, LLC         3. State of Formation         State: RI         NAICS CODE         Enter the six digit NAICS Code that best describes the primary business conducted by the entity.<br>Download the list of codes here, More information on NAICS can be found online.         \$31390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode<br>Island         HOLD AND MANAGE REAL ESTATE         5. Principal Office Address         No. and Street:       2 SEMINOLE ST<br>City or Town:         Contact Name: Contact Title:         No. and Street:       2 SEMINOLE ST<br>Contact Name: Contact Title:         No. and Street:       55 MEMORIAL BLVD<br>City or Town:       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:       Contact Name: Contact Title:         No. and Street:       55 MEMORIAL BLVD<br>City or Town: </td <td>Division Of Business S</td> <td>Services</td>   | Division Of Business S   | Services                                       |
| (401) 222-3040         Limited Liability Company<br>Annual Report         Filing Period: February 1 - May 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or<br>refusing to file its annual report within thirty (30) days after the time prescribed by<br>law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024         1. ID No. 001678018         2. Exact Name of the Limited Liability Company Fairwinds Marina, LLC         3. State of Formation<br>State: RI         NAICS CODE         Enter the six digit NAICS Code that best describes the primary business conducted by the entity.<br>Download the list of codes here, More information on NAICS can be found online.         531390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode<br>Island         HOLD AND MANAGE REAL ESTATE         5. Principal Office Address         No. and Street: <u>2 SEMINOLE ST</u><br>City or Town:       Yate: RI       Zip: 02889       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Title:<br>No. and Street: <u>55 MEMORIAL BLVD</u><br>City or Town:       NEWPORT       State: RI       Zip: 02840       Country: USA       7. RESID   | 148 W. River Stre  | eet  |
| Limited Liability Company<br>Annual Report<br>Filing Period: February 1 - May 1<br>In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or<br>refusing to file its annual report within thirty (30) days after the time prescribed by<br>law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.<br>ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024<br>1. ID No. 001678018<br>2. Exact Name of the Limited Liability Company Fairwinds Marina, LLC<br>3. State of Formation<br>State: BI<br>NAICS CODE<br>Enter the six digit NAICS Code that best describes the primary business conducted by the entity.<br>Download the list of codes hare, More information on NAICS can be found online.<br>531390<br>4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode<br>Island<br>HOLD AND MANAGE REAL ESTATE<br>5. Principal Office Address<br>No. and Street: 2 SEMINOLE ST<br>City or Town: WARWICK State: RI Zip: 02889 Country: USA<br>6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:<br>Contact Name: Contact Title:<br>No. and Street: 55 MEMORIAL BLVD<br>City or Town: NEWPORT State: RI Zip: 02840 Country: USA<br>7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER<br>Changes Require Filing of Form 642 - RJ.G.L. 7-16-11   |  |  |
| Annual Report Filing Poiled: February 1 - May 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b2c)) is subject to a penalty fee of \$25.00.  ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024 1. ID No. 001678018 2. Exact Name of the Limited Liability Company Fairwinds Marina, LLC 3. State of Formation State: RI NAICS CODE Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. 531390 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island HOLD AND MANAGE REAL ESTATE 5. Principal Office Address No. and Street: 2 SEMINOLE ST City or Town: WARWICK State: RI Zip: 02889 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: Contact Title: No. and Street: 55 MEMORIAL BLVD City or Town: NEWPORT State: RI Zip: 02840 Country: USA 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11   | (401) 222-3040   |  |
| Filing Period: February 1 - May 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.  ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024 1. ID No. 001678018 2. Exact Name of the Limited Liability Company Fairwinds Marina, LLC 3. State of Formation State: RI NAICS CODE Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. 531390 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island HOLD AND MANAGE REAL ESTATE 5. Principal Office Address No. and Street: 2 SEMINOLE ST City or Town: WARWICK State: RI Zip: 02889 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: Contact Title: No. and Street: 55 MEMORIAL BLVD City or Town: NEWPORT State: RI Zip: 02840 Country: USA 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11   | Limited Liability Company<br>Annual Report   |  |
| refusing to file its annual report within thirty (30) days after the time prescribed by<br>law (R.I.G.L. 7-10-66(b&0)) is subject to a penalty tee of \$25.00.           ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024; 2024           1. ID No.         001678018           2. Exact Name of the Limited Liability Company Fairwinds Marina, LLC           3. State of Formation           State: RI           NAICS CODE           Enter the six digit NAICS Code that best describes the primary business conducted by the entity.           Download the list of codes here. More information on NAICS can be found online.           531390           4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island           HOLD AND MANAGE REAL ESTATE           5. Principal Office Address           No. and Street:         2 SEMINOLE ST           City or Town:         WARWICK           State: RI         Zip: 02889         Country: USA           6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name: Contact Title:           No. and Street:         55 MEMORIAL BLVD         State: RI         Zip: 02840         Country: USA           7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER         Changes Require Filling of Form 642 - R.I.G.L. 7-16-11         Country: USA   |  |  |
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| 3. State of Formation         State: RI         NAICS CODE         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.         531390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         HOLD AND MANAGE REAL ESTATE         5. Principal Office Address         No. and Street:       2 SEMINOLE ST         City or Town:       WARWICK       State: RI       Zip: 02889       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name:       Contact Title:       State: RI       Zip: 02840       Country: USA         RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11  | 1. ID No. 001678018  |  |
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| NAICS CODE         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.         531390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         HOLD AND MANAGE REAL ESTATE         5. Principal Office Address         No. and Street:       2 SEMINOLE ST         City or Town:       WARWICK       State: RI       Zip: 02889       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Title:         No. and Street:       55 MEMORIAL BLVD         City or Town:       NEWPORT       State: RI       Zip: 02840       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name:       Contact Title:       No. and Street:       55 MEMORIAL BLVD         City or Town:       NEWPORT       State: RI       Zip: 02840       Country: USA         Contact Title:         No. and Street:       55 MEMORIAL BLVD         City or Town:       NEWPORT       State: RI       Zip: 02840       Country: USA         Country: W   | State: BI  |  |
| Enter the six digit NAICS Code that best describes the primary business conducted by the entity.   Download the list of codes here. More information on NAICS can be found online.   531390   A Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island   HOLD AND MANAGE REAL ESTATE   S. Principal Office Address   No. and Street: 2 SEMINOLE ST   City or Town: WARWICK   State: RI Zip: 02889   Country: USA   6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:   Contact Title:   No. and Street: 55 MEMORIAL BLVD   City or Town: NEWPORT   State: RI   Zip: 02840 Country: USA   |  |  |
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| 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode<br>Island         HOLD AND MANAGE REAL ESTATE         5. Principal Office Address         No. and Street:       2 SEMINOLE ST<br>City or Town:         WARWICK       State: RI         Zip: 02889       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name:       Contact Title:<br>No. and Street:         No. and Street:       55 MEMORIAL BLVD<br>City or Town:       Country: USA         7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER<br>Changes Require Filing of Form 642 - R.I.G.L. 7-16-11       Vinter State: Right State: Righ   |  |  |
| Island<br>HOLD AND MANAGE REAL ESTATE<br>5. Principal Office Address<br>No. and Street: <u>2 SEMINOLE ST</u><br>City or Town: <u>WARWICK</u> State: <u>RI</u> Zip: <u>02889</u> Country: <u>USA</u><br>6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:<br>Contact Name: <u>Contact Title:</u><br>No. and Street: <u>55 MEMORIAL BLVD</u><br>City or Town: <u>NEWPORT</u> State: <u>RI</u> Zip: <u>02840</u> Country: <u>USA</u><br>7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER<br>Changes Require Filing of Form 642 - R.I.G.L. 7-16-11   | <u>531390</u>  |  |
| HOLD AND MANAGE REAL ESTATE         5. Principal Office Justice States         No. and Street:       2 SEMINOLE ST         City or Town:       WARWICK       State: RI       Zip: 02889       Country: USA         6. Mailing Address of Limited Liability Compare and Name or Title of Contact Person:         Contact Name: Contact Title:<br>No. and Street:       55 MEMORIAL BLVD<br>55 MEMORIAL BLVD<br>City or Town:       State: RI       Zip: 02840       Country: USA         Contact Name: Contact Title:<br>No. and Street:         State: RI       Zip: 02840       Country: USA         Contact Title:<br>No. and Street:         State: RI       Zip: 02840       Country: USA   | 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode |  |
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| City or Town:       WARWICK       State: RI       Zip: 02889       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:         Contact Name:       Contact Title:         No. and Street:       55 MEMORIAL BLVD       State: RI       Zip: 02840       Country: USA         7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11   | 5. Principal Office Address  |  |
| City or Town:WARWICKState: RIZip: 02889Country: USA6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:Contact Name:Contact Title:<br>No. and Street:S5 MEMORIAL BLVD<br>S5 MEMORIAL BLVDTitle: 02840Country: USACity or Town:NEWPORTState: RIZip: 02840Country: USA7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER<br>Changes Require Filing of Form 642 - R.I.G.L. 7-16-11   | No. and Street: 2 SEMINOLE ST  |  |
| Contact Name: Contact Title:         No. and Street:       55 MEMORIAL BLVD         City or Town:       NEWPORT         State: RI       Zip: 02840         Country: USA         7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER         Changes Require Filing of Form 642 - R.I.G.L. 7-16-11  |  | Zip: <u>02889</u> Country: <u>USA</u>          |
| No. and Street:       55 MEMORIAL BLVD         City or Town:       NEWPORT         State:       RI         Zip:       02840         Country:       USA  | 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:       |  |
| City or Town:       NEWPORT       State: RI       Zip: 02840       Country: USA         7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER<br>Changes Require Filing of Form 642 - R.I.G.L. 7-16-11       Country: USA  | Contact Name: Contact Title:   |  |
| 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER<br>Changes Require Filing of Form 642 - R.I.G.L. 7-16-11   |  |  |
| Changes Require Filing of Form 642 - R.I.G.L. 7-16-11   | City or Town: <u>NEWPORT</u> State: <u>R</u>   | <u>I</u> Zip: <u>02840</u> Country: <u>USA</u> |
| <u>GREGORY F. FATER 55 MEMORIAL BOULEVARD NEWPORT</u> , <u>RI 02840</u>   |  |  |
|   | GREGORY F. FATER 55 MEMORIAL BOULEVARD NEWPO   | <u>DRT</u> , <u>RI 02840</u>                   |

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 14 Day of March, 2024 at 3:06:33 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By JOSEPH MCGRADY

Signature of Authorized Person

Form No. 632 Revised 09/07

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