



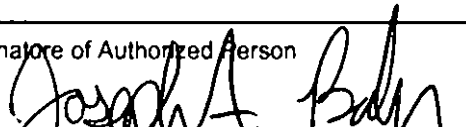
State of Rhode Island
Department of State - Business Services Division

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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.

1. Entity ID Number 000101321	2. Exact name of the Limited Liability Company Harvest Moon LLC			
3. NAICS Code 488330	4. Brief description of the character of business conducted in Rhode Island ownership and operation fo a fishing vessel			
5. State of Formation RI				
6. Principal Office Address 14 Lakeside Drive		City Charlestown	State RI	Zip 02813
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Joseph Baker		Contact Title Manager		
Street Address 14 Lakeside Drive		City Charlestown	State RI	Zip 02813
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
<i>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.</i>				
Name of Authorized Person Joseph Baker			Date 3/09/24	
Signature of Authorized Person 				

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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FILED *1217*
MAR 26 2024
BY *815*