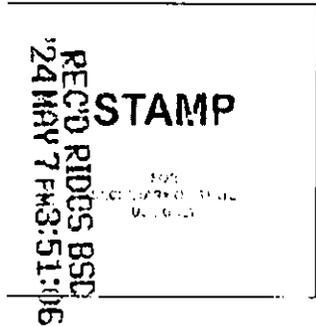




**State of Rhode Island
Department of State - Business Services Division**



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.

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------|--------------------|
| 1. Entity ID Number 000487652 | | 2. Exact name of the Limited Liability Company WINSTEAD'S MARINA LLC | |
| 3. NAICS Code 713930 | | 4. Brief description of the character of business conducted in Rhode Island MARINA | |
| 5. State of Formation RI | | | |
| 6. Principal Office Address 472-8 TIFFANY AVENUE | | City WARWICK | State RI |
| Zip 02889 | | | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name JOYCE W. BUTLER | | Contact Title OWNER | |
| Street Address 472-8 TIFFANY AVENUE | | City WARWICK | State RI |
| Zip 02889 | | | |
| 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 JOYCE W. BUTLER | | Date 5-4-24 | |
| Signature of Authorized Person <i>Joyce W. Butler</i> | | | |

FILED

MAY 07 2024
 BY W82ym
AA. 3:51 pm.

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