



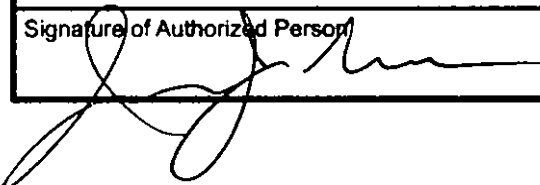
State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025
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.

REC'D RIDOS BSD
25 JAN 21 PM 12:19:42

STAMP

| | | | |
|---|--|---|--------------------|
| 1. Entity ID Number 001097507 | | 2. Exact name of the Limited Liability Company Full Keel Marine LLC | |
| 3. NAICS Code 441222 | | 4. Brief description of the character of business conducted in Rhode Island Boat Services | |
| 5. State of Formation RI | | | |
| 6. Principal Office Address 3 Esmond Ave | | City North Kingstown | State RI |
| Zip 02852 | | | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name Jonathan Mendes | | Contact Title Member | |
| Street Address 3 Esmond Ave | | City North Kingstown | State RI |
| Zip 02852 | | | |
| 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 Jonathan Mendes | | Date 01/21/2025 | |
| Signature of Authorized Person  | | | |

FILED

MAIL TO:

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

JAN 21 2025

BY FSZPH

AA. 12:24 pm.