State of Rhode Island and Providence Plantations Fee: \$50 Office of the Secretary of State					
Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040					
Limited Liability Co Annual Report Filing Period: September					
In accordance with R.I.G.	L. 7-16-66(d), each limited liab hitrity (30) days after the time				to
ANNUAL REPORT YEAR	<b>R</b> : <u>2010</u>				
<b>1. ID No.</b> <u>000140766</u>					
2. Exact Name of the Limited Liability Company Adams Realty Investment Company, LLC					
3. State of Formation					
State: <u>RI</u>					
REAL ESTATE HOLI	the Character of the Busines	S WINCI			
5. Principal Office Add	ress				
	<u>S PRISCILLA DRIVE</u> ARRINGTON	State	: <u>RI</u>	Zip: <u>02806</u>	Country: <u>USA</u>
6. Mailing Address of L	imited Liability Company ar	d Name	or Tit	le of Contact P	erson:
	Title: <u>PRISCILLA DRIVE</u> ARRINGTON	State	· RI	Zip: 02806	Country: USA
· <u> </u>	of Each Manager of the Limi				·
Title	Individual Name			Add	Iress
	First, Middle, Last, Suffix		Add	tress, City or Town,	State, Zip Code, Country
MANAGER	JOSEPH ADAMS		35 PRISCILLA DRIVE BARRINGTON, RI 02806 USA		
	RHODE ISLAND - DO NOT A				
	ng of Form 642 - R.I.G.L. 7-1		0000		
JUSEPH ADAMS 35 F	PRISCILLA DRIVE BARRINGTO	<u>את</u> , <u>או</u> 0	2806		

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

**Signed this 13 Day of October, 2010 at 8:07:58 AM 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 ADAMS Signature of Authorized Person

Form No. 632 Revised 09/07

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