



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 86952		2. Exact name of the limited liability company Gemma Realty, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE HOLDING & INVESTMENT			
5. Principal office address One Wellington Road			City Lincoln	State RI	Zip 02865
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name LEONARD P GEMMA			Contact Title Member		
Street Address One Wellington Road			City Lincoln	State RI	Zip 02865
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name ORSON AND BRUSINI LTD.			Address 55 DORRANCE STREET, SUITE 400		
Address			City PROVIDENCE	Zip 02903-	

This report must be signed in ink by an authorized person pursuant to 7-16-66.



8 6 9 5 2

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.

[Signature]
Signature of Authorized Person _____ Date _____

Leonard P. Gemma, Member
Print or Type Name of Authorized Person

86952 DLLC 09/11/05 03:14:39 PM

File Date 10/6/05

Check No. 2196

By: JM

FOR SECRETARY OF STATE USE ONLY



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 86952		2. Exact name of the limited liability company Gemma Realty, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE HOLDING & INVESTMENT	
5. Principal office address 544 DOUGLAS AVENUE		City PROVIDENCE	State RI Zip 02908
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name LEONARD P GEMMA		Contact Title	
Street Address 544 DOUGLAS AVE.		City PROVIDENCE	State RI Zip 02908-
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
State	City	State	Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
State	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name Robert J. Levine, ESQ.		Address 544 Douglas Avenue	
Address		City Providence	Zip 02908

This report must be signed in ink by an authorized person pursuant to 7-16-66.



8 6 9 5 2

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV.
NOV 1 2 17 PM '04

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.

FILED

86952 DLLC 10/20/04 2:06 PM

File Date NOV 01 2004

Check No. By m49048

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

[Signature] 10-29-04
Signature of Authorized Person Date

Robert J. Levine
Print or Type Name of Authorized Person



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2003

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1 ID No 86952		2 Exact name of the limited liability company Gemma Realty, LLC	
3 State of Formation RHODE ISLAND		4 Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE HOLDING & INVESTMENT	
5 Principal office address 544 DOUGLAS AVENUE		City PROVIDENCE	State RI Zip 02908
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name LEONARD P GEMMA		Contact Title	
Street Address 544 DOUGLAS AVE.		City PROVIDENCE	State RI Zip 02908-
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
State	City	State	Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
State	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name ANTHONY P. GEMMA, ESQ.		Address 544 DOUGLAS AVENUE	
Address		City PROVIDENCE	Zip 02908-

This report must be signed in ink by an authorized person pursuant to 7-16-66.



8 6 9 5 2

86952 DLLC 10/14/03 10:38:41 AM
File Date 10-31-03
Check No 1096
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

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.

Anthony P Gemma 10-31-03
Signature of Authorized Person Date
Anthony P Gemma
Print or Type Name of Authorized Person



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 86952		2. Exact name of the limited liability company Gemma Realty, LLC	
3. State of Formation Rhode Island		4. Brief description of the character of the business which is actually conducted in Rhode Island Real Estate Holding & Investment	
5. Principal office address 544 Douglas Avenue		City Providence	State RI Zip 02908
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Leonard P. Gemma		Contact Title	
Street Address 544 Douglas Avenue		City Providence	State RI Zip 02908
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
State	City	State	Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
State	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name Anthony P. Gemma, Esq.		Address	
Address 544 Douglas Avenue		City Providence	Zip 02908

This report must be signed in ink by an authorized person pursuant to 7-16-66.



8 6 9 5 2

File Date 10-31-02
Check No. 129
By: LMF
FOR SECRETARY OF STATE USE ONLY

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.

[Signature] 10/30/02
Signature of Authorized Person Date
Leonard Gemma
Print or type Name of Authorized Person

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLLC 86952

Annual Report for the year 2001

1. The name of the limited liability company is:

Gemma Realty, LLC

2. The address of the principal office of the limited liability company is:

544 Douglas Avenue, Providence, RI 02908

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: ANTHONY P. GEMMA, ESQ.

544 DOUGLAS AVENUE PROVIDENCE RI 02908-

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:

Leonard P. Gemma
544 Douglas Avenue, Providence, RI 02908

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Real Estate Investment and Leasing

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	Address
_____	_____
_____	_____
_____	_____

Dated _____

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.



Gemma Realty, LLC
Exact Name of Limited Liability Company

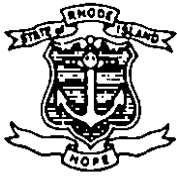
By [Signature]
MEMBER
Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>10-3-01</u>
Check No.:	<u>803</u>
By:	<u>[Signature]</u>

Form No. 632
Revised 01/99

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLLC 86952

Annual Report for the year 2000

1. The name of the limited liability company is:

Gemma Realty, LLC

2. The address of the principal office of the limited liability company is:

544 DOUGLAS AVE, PROV, RI 02908

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: ANTHONY P. GEMMA, ESQ.

544 DOUGLAS AVENUE PROVIDENCE RI 02908

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Leonard P. GEMMA

544 DOUGLAS AVE PROV, RI 02908

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Real Estate Investment & Leasing

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

Dated _____

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.



8 6 9 5 2

Gemma Realty, LLC

Exact Name of Limited Liability Company

By _____

[Signature]

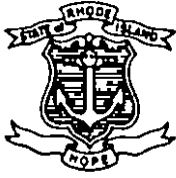
Member

Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>12/14</u>
Check No.:	<u>400</u>
By:	<u>[Signature]</u>

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number LL 86952

Annual Report for the year 1999

1. The name of the limited liability company is:

Gemma Realty, LLC

2. The address of the principal office of the limited liability company is:

544 Douglas Avenue, Providence, RI 02908

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: GIRARD R. VISCONTI

VISCONTI & ASSOCIATES LTD. 55 DORRANCE STREET PROVIDENCE, RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: 544 Douglas Avenue, Providence, RI 02908

Leonard P. Gemma

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Real estate holding and management

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

Dated 9/9/99



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.

Gemma Realty, LLC

Exact Name of Limited Liability Company

By

MEMBER

Title

FOR SECRETARY OF STATE USE ONLY
File Date: 9-15-99
Check No.: 218
By: AMF

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number LL 86952

Annual Report for the year 1998

1. The name of the limited liability company is:

Gemma Realty, LLC

2. The address of the principal office of the limited liability company is:

544 Douglas Avenue, Providence, RI 02908

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: GIRARD R. VISCONTI

VISCONTI & ASSOCIATES LTD. 55 DORRANCE STREET PROVIDENCE, RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Leonard P. Gemma, Member, 544 Douglas Avenue,

Providence, RI 02908

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: real estate holding and management

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

None

Dated _____, 19 98

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.



Gemma Realty, LLC

Exact Name of Limited Liability Company

By _____

Leonard P. Gemma, Member

Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>9.21.98</u>
Check No.:	<u>200</u>
By:	<u>WP</u>

Form No. LLC-19
Revised 8/97

DETACH BOTTOM BEFORE RETURNING

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

ID Number 0086952

Annual Report for the year 1997

1. The name of the limited liability company is:

Gemma Realty, LLC

2. The address of the principal office of the limited liability company is:

555 Douglas Avenue, Providence, RI 02908

3. The state or other jurisdiction under the laws of which it is formed is: Rhode Island

4. The name and address of its resident agent is: Girard R. Visconti, Esq., 55 Dorrance Street,
Providence, RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Leonard P. Gemma, 555 Douglas Avenue,
Providence, RI 02908

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: real estate holding

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

None

Dated 9/5, 19 97

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.

FILED

SEP 05 1997

By [Signature]

Gemma Realty, LLC
Exact Name of Limited Liability Company

By [Signature]

Leonard P. Gemma, Member

Title

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1

State of Rhode Island and Providence Plantations
Office of the Secretary of State
Corporation Division
100 North Main Street
Providence, RI 02903-1335

LIMITED LIABILITY COMPANY

LLC I.D.# 86952

Annual Report for the year 1996

FIRST: The name of the limited liability company is: **Gemma Realty, LLC**

SECOND: The address of the principal office of the limited liability company is:

555 Douglas Avenue, Providence, RI 02908

THIRD: The state or other jurisdiction under the laws of which it is formed is: **Rhode Island**

FOURTH: The name and address of its resident agent is:

Girard R. Visconti, Esq., 55 Dorrance Street, Providence, RI 02903

FIFTH: The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:

Mr. Leonard P. Gemma, Member

555 Douglas Avenue, Providence, RI 02908

SIXTH: A brief statement of the character of the business in which the corporation is actually engaged in this state:

real estate holding and investment

Dated 10/16, 19 96

Gemma Realty, LLC

Exact Name of Limited Liability Company

File Date:

10/30/96

Check No:

101

By:

ll

For Secretary of State Use Only

By Leonard P. Gemma, Member

*To be signed in the manner required by the home state.

Title

Member