RI SOS Filing Number: 200700611690 Date: 09/13/2007 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, *Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

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

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of $25.00.

1. ID No.	2. Exact name of the limited liability company
110355	Knightsville Realty, LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
Rhode Island	Real Estate

5. Principal office address	City	State	Zip
273 Great Road / Roland Boucher	North Smithfield	Rhode Island	02896

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title
Roland Boucher	

Street Address	City	State	Zip
273 Great Road	North Smithfield	Rhode Island	02896

7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS
FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐

Manager Name	Manager Name
Farmington Investment Group, LLC	
Street Address	Street Address
c/o Roland Boucher , 273 Great Road	
City / State / Zip	City / State / Zip
North Smithfield / Rhode Island / 02896	
Manager Name	Manager Name
Street Address	Street Address
City / State / Zip	City / State / Zip

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8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11

Agent Name	Address
Jon A. Mills	222 Jefferson Blvd.

Address	City	Zip
Campanella & Mills, Ltd.	Warwick	02888

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

[redacted] 110355 [redacted]

FILED
File Date SEP 13 2007
Check No. By 036695
By:
FOR SECRETARY OF STATE USE ONLY

8:32

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.

[redacted]

Signature of Authorized Person *Date* 9/12/07

Stephen A. Cardi

Print or Type Name of Authorized Person

Form 632 Rev. 07/07

13465-8-179476