

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

2007

401.222.3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

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

<i>iting Perioa: Sep</i> HIS REPORT MU	ST BE T	YPED OR PE	RINTED LEGIBLY IN	BLACK INK				
1. ID No. 19475	2. Exact r	name of the limited liability company Post Road, LLC						
3. State of Formation		4. Brief description	of the character of the busine	ess which is actually conducted in Rhode Isla	and			
	]	Real Estate	2					
Rhode Island		l <u> </u>		City	State	Zip		
5. Principal office address 5946 Post Road			North Kingstown	RI	02852			
J40 FOSL ROC	oc of t	MARTER HARD	ETTY COMPANY AND N	AME OR TITLE OF CONTACT PE	RSON:			
	255 OF L	MILED TWO		. Comme rate				
Contact Name Richard G. Fryburg				Operating Manager				
				City	State	Zip		
Street Address  946 Post Road				North Kingstown	RI	02852		
946 FOSC ROOM	<b></b>		or mile likited	LIABILITY COMPANY, IF APPLICATE ACHMENTS ("X" BOX FOR	ABLE - DO N	OT LIST MEMBERS		
7. NAME AND ADD	RESS OF	EACH MANA	GER OF THE LIMITED	ATTACHMENTS ("X" BOX FOR	ATTACHMENT)			
AT	NY MODI	FICATIONS TO	MANAGERS REQUIR	ES FILING OF AMENDMENT, R.I.	G.L. 7-16-12 (a	.) (2) / 7-16-52		
	11 112022			Manager Name				
Manager Name								
Richard G. Fr	yourg	<del></del>		Street Address				
Street Address								
6946 Post Roa	ıd		Tzin	City	State	Zip		
City North Kingsto	own	State RI	<i>Zip</i> 02852					
				Manager Name	Manager Name			
Manager Name								
Street Address				Street Address				
Street Audress						77.		
City		State	Zip	City	State	Zip		
1 "					 	 16-11		
8. RESIDENT AGE	NT IN R	HODE ISLAND	- DO NOT ALTER - Ch	nanges require filing of Form 64	tz - K.I.V.L. /*	10- * 1		
Agent Name				Address				
Giovanni D. Cici	ione							
Address				City		Zip		
282 County Road				Barrington	arrington 02806			
282 Country K	Jau							

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



File Date	9-11-07
Check No.	1477
Ву:	mnc
F	FOR SECRETARY OF STATE USE ONLY

penalty of perjury, I declare and affirm that I have examined this report, tling any accompanying schedules and statements, and that all statements, and corre ned herein Are to

Richard G. Fryburg

Print or Type Name of Authorized Person