



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 2007

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 134164		2. Exact name of the limited liability company The Hotel Providence Operating Company, LLC	
3. State of Formation RI		4. Brief description of the character of the business which is actually conducted in Rhode Island Operation of hotel facility	
5. Principal office address 63 Fountain Ave.		City Portsmouth	State RI Zip 02871
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Eva H. Hill c/o Westminster Street Hotel, LLC		Contact Title	
Street Address 63 Fountain Ave.		City Portsmouth	State RI Zip 02871
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILE IN SPACES BEFORE USING ATTACHMENTS (X) BOX FOR ATTACHMENT <input checked="" type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name SW Boutique, LLC		• Manager Name	
Street Address 63 Fountain Ave.		• Street Address	
City Portsmouth	State RI	Zip 02871	• 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 CT Corporation System		Address 10 Weybosset Street	
Address		City Providence	Zip 02903

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



1 3 4 1 6 4

File Date	FILED 11/13
Check No.	06T 03 2007
By:	By [Signature] 28538
FOR SECRETARY OF STATE	

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.

See attached Signature Page 6
Signature of Authorized Person Date

Print or Type Name of Authorized Person

Signature Page for Limited Liability
Company Annual Report for the Year 2007

The Hotel Providence Operating Company, LLC, a Rhode Island
limited liability company

By: SW Boutique, LLC, a Rhode Island
limited liability company, Managing Member

By: Westminster Street Hotel, LLC, a Delaware
limited liability company

By: UKI Providence, Inc., a Delaware
corporation, Its Manager

By: Eva H. Hill
Eva H. Hill, President