



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

RECEIVED  
AUG 24 2007

**LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007**

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

BLACKMAN INSURANCE

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. <b>155278</b>		2. Exact name of the limited liability company <b>Birkshire Properties LLC</b>	
3. State of Formation <b>RHODE ISLAND</b>		4. Brief description of the character of the business which is actually conducted in Rhode Island <b>Real Estate Investment</b>	
5. Principal office address <b>655 MAIN Street, Suite 208</b>		City <b>EAST Greenwich</b>	State <b>RI</b>
		Zip <b>02818</b>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name <b>RICHARD S BLACKMAN</b>		Contact Title <b>Member</b>	
Street Address <b>655 MAIN St, Suite 208</b>		City <b>EAST Greenwich</b>	State <b>RI</b>
		Zip <b>02818</b>	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - <b>DO NOT LIST MEMBERS</b> FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
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 <b>RICHARD S. BLACKMAN</b>		Address	
Address <b>655 MAIN STREET, SUITE 208</b>		City <b>EAST GREENWICH</b>	Zip <b>02818-</b>

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

File Date	<b>FILED</b>
Check No.	<b>SEP 18 2007</b>
By:	<b>1142</b>
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.

Richard S Blackman 09/14/07  
Signature of Authorized Person Date  
RICHARD S BLACKMAN  
Print or Type Name of Authorized Person