



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. 118352		2. Exact name of the limited liability company Richard A. Catalozzi Building, 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			
5. Principal office address 25 Roberts Way			City North Kingstown	State Rhode Island	Zip 02852
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Richard A. Catalozzi			Contact Title Operating Manager		
Street Address 25 Roberts Way			City North Kingstown	State Rhode Island	Zip 02852
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) <input type="checkbox"/>					
Manager Name Richard A. Catalozzi			Manager Name		
Street Address 25 Roberts Way			Street Address		
City North Kingstown	State Rhode Island	Zip 02852	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 Richard A. Catalozzi			Address 25 Roberts Way		
Address			City North Kingstown	Zip 02852	

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

118352

File Date	FILED
Check No.	SEP 18 2007
By:	487
By 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 A. Catalozzi* 9-11-07  
Signature of Authorized Person Date

Richard A. Catalozzi

Print or Type Name of Authorized Person