



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. 101670		2. Exact name of the limited liability company NORWOOD-JEB, L.L.C.			
3. State of Formation NEW JERSEY		4. Brief description of the character of the business which is actually conducted in Rhode Island PROPERTY MANAGEMENT			
5. Principal office address c/o Graham O. Jones 45 Essex Street		City Hackensack	State NJ	Zip 07601	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Graham O. Jones			Contact Title		
Street Address 45 Essex Street		City Hackensack	State NJ	Zip 07601	
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 Graham O. Jones			Manager Name		
Street Address 45 Essex Street		Street Address			
City Hackensack	State NJ	Zip 07601	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 JOSEPH PRIESTLEY, ESQ.			Address		
Address 85 BEACH STREET		City WESTERLY	Zip 02891		

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

FILED

File Date **SEP 26 2007**

Check No. **By 3384**

By: **3384**

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.

Graham O. Jones 9/12/07
Signature of Authorized Person Date

Graham O. Jones
Print or Type Name of Authorized Person