



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
141 W. Pier Street
Providence, RI 02903-2015
Jan 22, 2008

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. 130850		2. Exact name of the limited liability company Gardner Realty, 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 145 WEST 86TH STREET, APT 14-B		City NEW YORK		State NY	Zip 10024
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name: EMERSON GARDNER Contact Title: MR.					
Street Address 145 WEST 86TH STREET, APT 14-B		City NEW YORK		State NY	Zip 10024
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 EMERSON GARDNER		Manager Name PIERCE GARDNER			
Street Address 145 WEST 86TH STREET, APT 14-B		Street Address 10 JOHNS ROAD			
City NEW YORK	State NY	Zip 10024	City SETAUKET	State NY	Zip 11733
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 RENEE A. R. EVANGELISTA, ESQ.		Address EDWARDS ANGELL PALMER & DODGE LLC			
Address 2800 FINANCIAL PLAZA		City PROVIDENCE		Zip 02903	

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

130850

FILED	
File Date	OCT 09 2007
Check No.	1118
By:	By
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.

Holly G. Bontecou
Signature of Authorized Person Date

HOLLY G. BONTECOU, MEMBER

Print or Type Name of Authorized Person