

A. Ralph Mollis, Secretary of State

Corporations Division 148 W. River Street Providence. RI 02904-2615

401.222.3040

2007

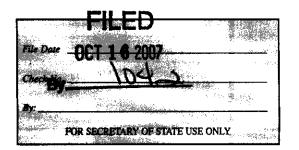
LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR_

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. 136835	2. Exact name of the limited liability company HOME RUN PROPERTIES, LLC							
3. State of Formation RHODE ISLAND 4. Brief description of the character of the business whice REAL ESTATE LESSOR				th is actually conducted in Rhode Island	(
5. Principal office address 951 North Hain St.				Providence	State RI		^{Zip} 01904	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME Contact Name Alam H. Litwin				OR TITLE OF CONTACT PERSON: Contact Title				
951 North Main St.				Providence	State		240 Q	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - <u>DO NOT LIST MEMBERS</u> FILL IN SPACES BEFORE USING ATTACHMENTS (** SON FOR ATTACHMENT)								
Manager Name				Manager Name				
Street Address				Street Address				
City	3	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 Agent Name ALAN LITWIN				require filing of Form 642 - R.I.G.L. 7-16-11 Address				
Address 951 NORTH MAIN STREET				PROVIDENCE	E		Zip 02904-	

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



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.

9/12/07

Signature of Authorized Person

LIZWIN

Print or Type Name of Authorized Person