

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.	No. 2. Exact name of the limited liability company						
119186		n Metacom, LLC					
3. State of Formation	•	4. Brief description of the	character of the husiness w	bich is actually conducted in Rhode i	sland		
Rhode Island		Acquire, sell, mana	ge, operate & maintai	n real property			
5. Principal office address				City	State	Zip	
LANDTECH CORP. 21 TECHNOLOGY DRIVE, SUITE 6				WEST LEBANON	NH	03784	
6. MAILING ADDRE	SS OF L	IMITED LIABILITY (COMPANY AND NAM	E OR TITLE OF CONTACT P	ERSON:		
Contact Name				Contact Title			
KENNETH S. MAY				Attorney			
Street Address				City:	State	Zip	
50 MILK STREET, 20TH FLR.				BOSTON	MA	02109	
7. NAME AND ADDI	RESS OF		F THE LIMITED LIAI S BEFORE USING AT	BILITY COMPANY, IF APPLI- TACHMENTS ("X" BOX FOR		OT LIST MEMBERS	
Manager Name				Manager Name			
William Braucher				Bukk G. Carleton, III			
Street Address 50 Milk Street, 20th Flr				Street Address LANDTECH CORP, 21 Technology Dr., Suite 6			
^{City} Boston		State MA	^{Zip} 02109	City West Lebanon	State NH	03784	
Manager Name				Manager Namo			
Street Address				Street Address			
City		State	Zip	City:	State	Zip	
8. RESIDENT AGEN	T IN RH	ODE ISLAND - DO N	· ·OT ALTER - Change	: s require filing of Form 64	2 - R.I.G.L. 7-1	.6-11	
Agent Name				Address			
DAVID P. MARTLAND, ESQ.				1100 AQUIDNECK AVENUE			
Address				City Zip		Zip	
SILVA THOMAS MARTLAND & OFFENBERG, LTD.				MIDDLETOWN	LETOWN 02842		

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

File Date	FILED
Check No.	OCT 18 2007
Ву:	By 52298
FO	R 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.

Signature of Authorized Person

David P. Martland, Esq.

Print or Type Name of Authorized Person