



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-3335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 131937		2. Exact name of the limited liability company LACROIX FAMILY PROPERTIES, L.L.C.			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE MANAGEMENT			
5. Principal office address 15 WARREN AVENUE		City CUMBERLAND	State RI	Zip 02864-	
6. MAILING ADDRESS					
Contact Name STEPHEN J DIGIANFILIPPO		Contact Title			
Street Address 50 PARK ROW WEST, SUITE 111		City PROVIDENCE	State RI	Zip 02903-	
7. MANAGER INFORMATION					
Manager Name Donald J. Lacroix		Manager Name Jacqueline P. Lacroix			
Street Address 15 Warren Avenue		Street Address 15 Warren Avenue			
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENTIAL ADDRESS					
Agent Name STEPHEN J. DIGIANFILIPPO, ESQ.		Address 50 PARK ROW WEST, SUITE 111			
Address VIEIRA & DiGIANFILIPPO LTD.		City PROVIDENCE	Zip 02903-		

This report must be signed in ink by an authorized person pursuant to 7-16-66.



FILED

File Date
NOV 01 2007
Check No.
By 42152
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.

Donald J. Lacroix 10-30-07
Signature of Authorized Person Date
Donald J. Lacroix, Manager
Print or Type Name of Authorized Person