

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.	2. Exact	xact name of the limited liability company							
143279	AGR P	PROPERTIES, LLC							
3. State of Formation 4. Brief description of the character of the business whi TENAMENT HOUSE			ch is actually conducted in Rhode Isla	and					
5. Principal office address 700 Metacom Avenue				City Warren	State R.	State RI Zip 02885			
6. MAILING ADDRI Contact Name Maria Anto		· · · · · · · · · · · · · · · · · · ·	COMPANY AND NAME	OR TITLE OF CONTACT PE Contact Title Manager	econ .		in the second se		
Street Address Same as Above				City	State	Zip			
7. NAME AND ADD		EACH MANAGER O FILL IN SPACE		LEGENBURYS: ('X' BOX POR A	A CHARLES	OT LIST MEM	BERS		
Manager Name			Manager Name						
Street Address			Street Address		21	VŽ.			
City		State .	Zip ,····	City	State		(1) 14 (1) (1) (1) (2) (1) (2) (3) (1) (2)		
Manager Name				Manager Name		¥ 29			
Street Address				Street Address		<u> </u>	<u> </u>		
City		State	Zip	City	State	00	N. C.		
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes Agent Name ROBERT J . HEALEY, JR. ESQ.			require filing of Form 642 Address	- R.I.G.L. 7-1	6-11	O *			
Address 665 METACOM AVENUE				City WARREN		Zip 2346 02885-			

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

File Date			
Check No.	. 1050-1	7 2007	ASSESSED TO SESSED TO SESS
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1 Kron	CAR	w	11-20	<u>-07</u>
Signature of Autho	rized Person	Date	2	
MARIA	ANTU	NIAD	<i>VS</i>	
Print or Type Nan	ne of Authorized Per	son		