



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

A. Ralph Molits, 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. 125046		2. Exact name of the limited liability company KENDAN, 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 INVESTMENT	
5. Principal office address 613 Aquidneck Ave		City Middletown	State RI
		Zip 02842	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Daniel D. Donovan III		Contact Title President	
Street Address 613 Aquidneck Ave.		City Middletown	State RI
		Zip 02842	
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) <input type="checkbox"/>			
Manager Name Daniel D. Donovan III		Manager Name Kenneth A. Marshall	
Street Address 97 Windward Dr.		Street Address 83 Mulberry Rd.	
City Portsmouth	State RI	City Bristol	State RI
Zip 02871		Zip 02809	
Manager Name Daniel D. Donovan IV + Bryant J. Donovan		Manager Name Linda Felix Franklin	
Street Address 14 Birch St.		Street Address 296 Stoney Hollow Rd.	
City Portsmouth	State RI	City Tiverton	State RI
Zip 02871		Zip 02878	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name CHRISTOPHER J. BEHAN, ESQ.		Address	
Address 294 VALLEY ROAD		City MIDDLETOWN	Zip 02842

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

FILED

JAN 23 2008

BY 247612

File Date _____
Check No. _____
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.

Daniel D. Donovan III

11/1/07

Signature of Authorized Person

Date

Daniel D. Donovan III
Print or Type Name of Authorized Person