

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

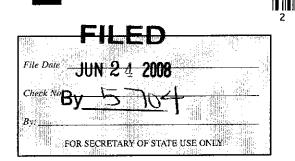
Filing Period: June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

401.222.3040

* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject

to a penaity fee of \$25.00.						
1. Corporate ID No.	2. Name of Corporation					
275790	LBB Corp.					
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address			City		Zip
Rhode Island	c/o Church Community Housing Corp, 50 Washington Square			Newport	, RI	02840
5. Foreign corporation. Enter principal office address			City	State		Zip
N/A						
6. Brief Description of the character of the affairs which are actually conducted in Rhode Islan			and			
Sole general partner of a limited partnership formed to provide elderly partner physical, social, & psychological needs, & to promote their health, The NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACH. President Name Robert M. Sabel			, security, happiness & usefulness in longer living.			
Street Address			Street Address			
50 Washington Square						
City	State	Zip	City	State		Zip
Newport	Rhode Island	02840				
Secretary Name			Treasurer Name			
Marjorie Jensen			Paul Murphy			
Street Address 1724 Crandall Road			Street Address 598 Middle Road			
City	State	Zip	City	State		Zip
Tiverton	Rhode Island	02878	Portsmouth	Rhode	Island	02871
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATTAC	<i>HMENT)</i> FILL IN SPACES BI	EFORE USI	NG ATTACH	MENTS
THE NUMBER OF DIRECTO	ORS OF A DOMESTIC	(RHODE ISLAND) C	ORPORATION SHALL NOT B	E LESS TH	AN THREE	(3). R.I.G.L. 7-6-23
Director Name			Director Name			
Robert M. Sabel			Paul Murphy			
Street Address			Street Address			
50 Washington Square			598 Middle Road			
CMy	State	Zip	City	State		ZΦ
Newport	Rhode Island	02840	Portsmouth	Rhode Island 02871		02871
Director Name			Director Name			
Marjorie Jensen			Patricia Sargent			
Street Address			Street Address			
1724 Crandall Road			269 Oliphant Lane			
City	State	Zip	City	State		Zip
Tiverton	Rhode Island	02878	Middletown	Rhode		02842
The state of the s	RHODE ISLAND - DO) NOT ALTER - Chang	es require filing of Form 64	u - K.I.G.L.	7-6-15 7 7-	0=78
Agent Name Kristin A. DeKuiper			Address			
Address			Cuy	z = -z		
One Financial Plaza, Suite 1400			Providence, RI 02903			
701 h	dant Casastony Augistant Casas	ton. Taxon	man Danaina	w on Tourton		

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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 Date Robert M. Sabel June 20, 2008

Print or Type Name of Officer

President

Title of Officer

Form 631 Rev. 12/06