



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

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. 157302	2. Exact name of the limited liability company WEST BEACH PROPERTIES LLC		
3. State of Formation RHODE ISLAND	4. Brief description of the character of the business which is actually conducted in Rhode Island HOLDING COMPANY		
5. Principal office address 1078 WEST BEACH ROAD		City BLOCK ISLAND	State RI
		Zip 02807	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name ANTHONY PIO COSTA III		Contact Title MANAGER	
Street Address 1275 BLOOMFIELD AVENUE		City FAIRFIELD	State NJ
		Zip 07004	
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 ANTHONY PIO COSTA III		Manager Name	
Street Address 1275 BLOOMFIELD AVENUE		Street Address	
City FAIRFIELD	State NJ	City	State
Zip 07004		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name ANTHONY PIO COSTA, III		Address	
Address 1078 WEST BEACH ROAD		City BLOCK ISLAND	Zip 02807-

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

File Date	FILED
Check No.	AUG 08 2008
By:	By 1030
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.

Signature of Authorized Person Date
ANTHONY PIO COSTA III
Print or Type Name of Authorized Person