

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 2008

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 (h&c)) is subject to a penalty fee of \$25.00

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2. Exact 1	name of the limited liability company									
Girard	Family, LLC									
	4. Brief description of the	character of the husiness whic	ch is actually conducted in I	Rbode Island						
Rhode Island Manage real estate.										
5. Principal office address			City	State		Zip				
59 Ferncrest Avenue			Pawtucket	l RI		02861				
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME Contact Name			OR TITLE OF CONTACT PERSON: Contact Title							
Robert Girard			Manager							
Street Address			Gity	State -		Ζip				
59 Ferncrest Avenue			Pawtucket	RI	a sala is the sala a sala a	02861				
RESS OF	EACH MANAGER O FILE IN SPACES	F THE LIMITED LIABI S BEFORE USING ATTA	LITY COMPANY, IF A CHMENTS ("X" BOX	PPLICABLE - <u>DO</u> FOR ATTACHMENT	NOT LIST	MEMBERS				
Manager Name			Manager Name							
Robert Girard										
Street Address			Street Address							
59 Ferncrest Avenue										
	State	Ζip	City	State		Ζip				
	RI	02861		,,,,,,,,,,,						
Manager Name			Manager Name							
Street Address			Street Address							
	State	Zip	City	State		Zip				
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sq.										
Address			City Zip		Ζip					
35 Highland Avenue			East Providence 02914							
	Girard nue ss of the	Girard Family, LLC 4. Brief description of the Manage real estate and the State Manager of Each Manager of Fill in Spaces State State C. IN RHODE ISLAND DO N. Sq.	A. Brief description of the character of the business which Manage real estate. The second second company and name are second company and nam	Girard Family, LLC 1. Brief description of the character of the business which is actually conducted in a Manage real estate. City Pawtucket SS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTA Contact Title Manager City Pawtucket Pawtucket SESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF A FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BO) Manager Name Street Address Nue Street Address Street Address City City City City City City City Cit	Girard Family, LLC 1. Brief description of the character of the business which is actually conducted in Rhode Island Manage real estate.	Girard Family, LLC 4. Brief description of the character of the business which is actually conducted in Nhode Island Manage real estate. City Pawtucket RI State RI Manager City Pawtucket RI Manager City Pawtucket RI State RI Manager City State RI Manager City State RI State RI Manager City State RI State RI Manager City State RI Manager City State RI Manager Street Address				

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

File Date			ILE	D	
Check No.		SEI	17	2008	
Ву:		Ву	180	لم	- 448
	FOR SECRE	TARY OF ST	ATE 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.

-11)+/I

Signature of Authorized Person

9-16-08

Robert Girard, Manager

Print or Type Name of Authorized Person