

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

(K.J.O.L. 7-10-00 (8&t))	a subject to	o a penan, jee of vicion	,						
1. ID No. 2. Exact name of the limited liability company 134471 Lexington Leadership Partners, LLC									
3. State of Formation	- 1	4. Brief description of the character of the husiness which is actually conducted in Rhode Island							
Rhode Island									
5. Principal office address			City	State		Zip			
144 DIVISION STREET				EAST GREENWICH	RI		02818		
6. MAILING ADDRE	SS OF LI	MITED LIABILITY (OMPANY AND NAME	OR TITLE OF CONTACT PERS	ON:				
Contact Name				Contact Title					
JAMES B. MILLARD				MEMBER City State Zip					
Street Address				City	State RI		02818		
144 DIVISION STF			EAST GREENWICH	[RI			10		
7. NAME AND ADD	RESS OF	EACH MANAGER O	f the limited Liabi	LITY COMPANY, IF APPLICAB	LE - <u>DO N</u>	OT LIST	MEM	BERS	
		FILL IN SPACE:	S BEFORE USING ATT.	CHMENTS ("X" BOX FOR ATT	ACHMENT)	U			
Manager Name				Manager Name					
Street Address				Street Address					
City		State	Zip	City	State		Zip		
		*********************		• • • •			.l		
Manager Name				Manager Name					
Street Address				Street Address					
			T	ev.	State		22		
City		State	Ζŧp	City	State		80 %	51 C.J.	
o premiert area	T IN DE	THE ISLAND DO	 SOT AITER - Chances	require filing of Form 642.	R.LG.L. 7-1	6-13	R	CM r	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes Agent Name				Address					
JAMES H. HAHN, ESQ.				180 South Main Street					
Address				City Zip					
PARTRIDGE SNOW & HAHN LLP				Providence 02903					
FARIRIDGE SINC	744 CX 17/	TI HY LLF	[1,13,143,115			ۻ	646		
•							***	ĒΞ	
						•	Ö	mi	
								\$2	

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

			88,0 FPE 14 LL LETTE CONTROL (1975)
	Control of the second s		
	Transaction Co.		
	: 200 ABAS ALL 22		
THE STATE OF THE S	THE OWNER HIS SE	ALEXANDER OF THE	
File Date	the state of the s		the second secon
The second second	CALL STREET, S	Contract Con	Market Street St
		200	
		220 DECEMBER 1	
Check No. SEP	الاأة الخطاء مناكا		
COLUMN TRUE		**************************************	
The second secon	AND THE PERSON NAMED IN COLUMN		84 P 44 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	First Store of the Control of the	Control of the control	200424111111111111111111111111111111111
7.A			
	200		
		44.01	Little Little Consistence .
1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2000	200 CO	
The state of the s	No. of the last contract of the Contract of	PER LA PROPERTY OF THE PER LA PERPLETAR PE	the property of the second
Phone Care	DATE AND AREA	CAPE THEFT IN	3.4
TOR SEC	RETARY OF S	PRATER TOTAL POST	100 CO. 111 CO
	100000000000000000000000000000000000000		2/2/2017/2019/04/04/04/04/04

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

)

JĂMES B. MILLARD

Print or Type Name of Authorized Person