RALPH MOI	State of Rhode Island Office of the	d and Provider Secretary of S		PNS Fee: \$50.0
	Corpo	orations Division		
		W. River Street		
Providence, Rhode Island 02904-2615				
etary of 5	-			
_imited Liability	y Company			
Annual Report Filing Period: Septe	mber 1 - November 1			
	R.I.G.L. 7-16-66(d), each limited l within thirty (30) days after the tir			to
	bject to a penalty fee of \$25.00.		W (M.I.O.L.	
ANNUAL REPORT				
1. ID No. 0001	143768			
2. Exact Name of	f the Limited Liability Company	WORKPLACE	CONDOMIN	IUM, LLC
3. State of Forma	ation			
State: Pl				
State: <u>RI</u>				
COMMERCIAL 5. Principal Office	REAL ESTATE CONDOMIN	IUM DEVELOPN	<u>MENT</u>	
·				
No. and Street:	231 ALDRICH AVENUE	State: RI	7in: 02880	Country: USA
City or Town:	WARWICK	State. <u>KI</u>	Zip: <u>02889</u>	Country: <u>USA</u>
6. Mailing Addres	s of Limited Liability Company	and Name or Titl	e of Contact P	erson:
Contact Name: Al	NTHONY LISI Contact Title:			
No. and Street:	231 ALRICH AVENUE			
City or Town:	WARWICK	State: RI	Zip: <u>02889</u>	Country: USA
7. Name and Add DO NOT LIST N	ress of Each Manager of the Li IEMBERS	mited Liability Co	ompany, if App	licable.
Title	Individual Nam	e	Add	ress
	First, Middle, Last, Su	ffix Add	ress, City or Town, S	State, Zip Code, Country
	NT IN RHODE ISLAND - DO NO re Filing of Form 642 - R.I.G.L.			
MICHAEL W. FA	VICCHIO, ESQ. 1200 RESERVO	IR AVENUE CRAN	ISTON , <u>RI 0292</u>	20-
9 This report mu	st be executed by an authorized	d person pursuan	t to R.I.G.L. 7-1	6-66 (b).

Signed this 7 Day of October, 2008 at 11:31:19 AM by the authorized person. This electronic

signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By MICHAEL W. FAVICCHIO Signature of Authorized Person

Form No. 632 Revised 09/07

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