



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

Fee: \$50.00

Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615  
Telephone: (401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

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.

**ANNUAL REPORT YEAR:** 2008

**1. ID No.** 000235382

**2. Exact Name of the Limited Liability Company** St. Francis Hotel, LLC

**3. State of Formation**

State: RI

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

HOTEL

**5. Principal Office Address**

No. and Street: C/O FIRST BRISTOL CORPORATION  
10 NORTH MAIN STREET

City or Town: FALL RIVER

State: MA Zip: 02720 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: SUZANNE E CORIATY Contact Title: CONTROLLER

No. and Street: 10 NO. MAIN STREET

City or Town: FALL RIVER

State: MA Zip: 02720 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

| Title   | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country           |
|---------|------------------------------------------------|----------------------------------------------------------------------|
| MANAGER | WEYBOSSET MANAGEMENT LLC                       | 10 NORTH MAIN STREET/FIRST BRISTOL CORP.<br>FALL RIVER, MA 02720 USA |

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER**  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

MOSES AFONSO JACVONY, LTD. 170 WESTMINSTER STREET, SUITE 201 PROVIDENCE , RI 02903

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

**Signed this 10 Day of October, 2008 at 12:08:58 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 MOSES AFONSO JACVONY LTD  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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