



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 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.

1. ID No. 159005		2. Exact name of the limited liability company Nancy Carol Realty, LIC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island real estate ownership and management			
5. Principal office address 125 South Poll Drive		P.O. Box 2502 Sarasota, FL 34230		City Sarasota	State FL
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Nancy C. Grello		P.O. Box 2502 (mailing) Sarasota, FL 34230		City Sarasota	State FL
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"/>		none		none	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11 Agent Name KAREN G. DELPONTE, ESQ.		56 EXCHANGE TERRACE		City PROVIDENCE	State 02903

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

159005

File Date	FILED
Check No.	OCT 20 2008
By:	By 4594
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.

Nancy C. Grello 10/9/08
Signature of Authorized Person Date
NANCY C. GRELLO
Print or Type Name of Authorized Person