



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. 151800		2. Exact name of the limited liability company Premier Investments, LLC	
3. State of Formation Rhode Island		4. Brief description of the character of the business which is actually conducted in Rhode Island Investments	
5. Principal office address 10 Memorial Blvd Suite 901		City Providence	State RI
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Anthony J. DeLuca		Contact Title Manager	Zip 02903
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"/>		City Providence	State RI
Manager Name Anthony J. DeLuca		City Providence	State RI
Street Address 10 Memorial Blvd Suite 901		City Providence	State RI
City Providence		State RI	Zip 02903
Manager Name		Manager Name	
Street Address		Street Address	
City Providence		State RI	Zip 02903
Manager Name		Manager Name	
Street Address		Street Address	
City Providence		State RI	Zip 02907
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11 Agent Name Montaquila & Summer. PC		Address	
Address 400 Reservoir Avenue, Suite 3A		City Providence	Zip 02907

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

151800

File Date	FILED
Check No.	OCT 20 2008
By	<i>[Signature]</i>
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.

[Signature] Date 10-7-08
Signature of Authorized Person
Anthony J. DeLuca
Print or Type Name of Authorized Person