



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* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* 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)(7)) is subject to a penalty fee of \$25.00.

1. ID No. 149671		2. Exact name of the limited liability company Athena-Providence Place (Leasehold) LLC	
3. State of Formation Delaware		4. Brief description of the character of the business which is actually conducted in Rhode Island Acquisition of Property with address of 903 Providence Place, Providence, RI 02903	
5. Principal office address c/o Athena Group LLC, 712 Fifth Avenue		City New York	State NY
		Zip 10019	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name		Contact Title	
Street Address		City	State
		Zip	
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"/>			
Manager Name Louis M. Dubin		Manager Name Steven F. Adler	
Street Address - c/o Athena Group LLC -- see address above		Street Address c/o Athena Group LLC -- see address above	
City	State	City	State
Manager Name Barry S. Seidel		Manager Name Jack M. Rosenfield	
Street Address c/o Athena Group LLC -- see address above		Street Address c/o Athena Group LLC -- see address above	
City	State	City	State
8. RESIDENT AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11			

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

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.

File Date	FILED
Check No.	OCT 20 2008
By:	By 1293
FOR SECRETARY OF STATE USE ONLY	

Signature of Authorized Person: *Maria J. Sulcer* Date: *10/13/08*
Print or Type Name of Authorized Person: **Maria J. Sulcer**