



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

A. Ralph Molis, 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)(c)) is subject to a penalty fee of \$25.00.

1. ID No. 154264		2. Exact name of the limited liability company Outlook Partners, LLC			
3. State of Formation Massachusetts		4. Brief description of the character of the business which is actually conducted in Rhode Island Owning, managing, investing, developing, leasing, buying and selling real estate			
5. Principal office address 27 Davis Road		City Chelmsford	State MA	Zip 01824	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name George Pappadopoulos			Contact Title		
Street Address 24 Davis Road		City Chelmsford	State MA	Zip 01824	
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 George Pappadopoulos			Manager Name William V. Tanski		
Street Address 24 Davis Road		Street Address 88 Outlook Drive			
City Chelmsford	State MA	Zip 01824	City Lexington	State MA	Zip 02421
Manager Name			Manager Name		
Street Address		Street Address			
City	State	Zip	City	State	Zip
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					

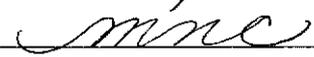
This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

154264

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.

 9/27/08
Signature of Authorized Person Date

George Pappadopoulos
Print or Type Name of Authorized Person

File Date	10-23-08
Check No.	1257
By:	
FOR SECRETARY OF STATE USE ONLY	