

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.

(K.I.O.L. 7-10-00 (D&C))	is subject	to a penaity jee of \$25.00						
I. ID No.	2. Exact	name of the limited liability company						
128480	Spring	Development, LLC						
3. State of Formation	tate of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island							
Rhode Island Real Estate Acquisition & Development								
5. Principal office address				City	State		Zip	
PO Box 870				Slatersville	RI		02876	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:								
Contact Name				Contact Title				
				Member				
Street Address				City	State		Zip	
PO Box 870				Slatersville	RI		02876	
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)								
Manager Name				Manager Name				
Street Address				Street Address				
City		State	Zip	City	State		Zip	
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Manager Name				Manager Name				
Street Address				Street Address				
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CH)		State	Zip	City	State		Ζψ	
o protocate acres	TO TAY DATE	ODE ISLAND DO N	OT ALTER Changes	- and the filling of Form 642	 	6 11	Į į	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11 Agent Name Address								
James J. Belliveau, Esq.				Belliveau & St. Sauveur, LLP				
Address				City Zip		7iti		
						02903	-	
50 Park Row West, Suite 102				Providence, RI 02903				

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.

Signature of Authorized Person Date

Dennis P. Darveau

Print or Type Name of Authorized Person