Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to ile 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.         ANNUAL REPORT YEAR: 2008         1. ID No.       000136576         2. Exact Name of the Limited Liability Company David Little Value Asset Advisors, LLC         3. State of Formation         State: DE         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
148 W. River Street         Providence, Rhode Island 02904-2615         Telephone: (401) 222-3040 <b>Limited Liability Company Annual Report</b> Filing Period: September 1 - November 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to Filing Period: September 1 - November 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to Filing Period: Subject to a penalty fee of \$25.00. <b>ANNUAL REPORT YEAR:</b> 2008 1. ID No. 000136576 2. Exact Name of the Limited Liability Company David Little Value Asset Advisors, LLC 3. State of Formation
148 W. River Street         Providence, Rhode Island 02904-2615         Telephone: (401) 222-3040
Providence, Rhode Island 02904-2615 Telephone: (401) 222-3040         simited Liability Company Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to the its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 2-16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR: 2008         1. ID No.       000136576         2. Exact Name of the Limited Liability Company David Little Value Asset Advisors, LLC         3. State of Formation         State: DE         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
Telephone: (401) 222-3040 Telephone: (401) 222-
Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to le its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 2-16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR: 2008         1. ID No.       000136576         2. Exact Name of the Limited Liability Company David Little Value Asset Advisors, LLC         3. State of Formation         State: DE         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
<ul> <li>Filing Period: September 1 - November 1</li> <li>In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to ite its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&amp;c)) is subject to a penalty fee of \$25.00.</li> <li>ANNUAL REPORT YEAR: 2008</li> <li>1. ID No. 000136576</li> <li>2. Exact Name of the Limited Liability Company David Little Value Asset Advisors, LLC</li> <li>3. State of Formation State: DE</li> <li>4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island</li> </ul>
<ul> <li>ile its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 2-16-66(b&amp;c)) is subject to a penalty fee of \$25.00.</li> <li>ANNUAL REPORT YEAR: 2008</li> <li>1. ID No. 000136576</li> <li>2. Exact Name of the Limited Liability Company David Little Value Asset Advisors, LLC</li> <li>3. State of Formation State: DE</li> <li>4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island</li> </ul>
<ul> <li>ANNUAL REPORT YEAR: 2008</li> <li>1. ID No. 000136576</li> <li>2. Exact Name of the Limited Liability Company David Little Value Asset Advisors, LLC</li> <li>3. State of Formation State: DE</li> <li>4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island</li> </ul>
<ul> <li>ANNUAL REPORT YEAR: 2008</li> <li>1. ID No. 000136576</li> <li>2. Exact Name of the Limited Liability Company David Little Value Asset Advisors, LLC</li> <li>3. State of Formation State: DE</li> <li>4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island</li> </ul>
<ol> <li>ID No. 000136576</li> <li>Exact Name of the Limited Liability Company David Little Value Asset Advisors, LLC</li> <li>State of Formation         State: DE     </li> <li>Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island     </li> </ol>
<ul> <li>2. Exact Name of the Limited Liability Company David Little Value Asset Advisors, LLC</li> <li>3. State of Formation State: DE </li> <li>4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island</li></ul>
<ul> <li>3. State of Formation</li> <li>State: <u>DE</u></li> <li>4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island</li> </ul>
State: <u>DE</u> 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
5. Principal Office Address
No. and Street: <u>39 BELLEVUE AVENUE</u>
City or Town:NEWPORTState: $\underline{RI}$ Zip: $\underline{02840}$ Country: $\underline{USA}$
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: Contact Title: No. and Street: <u>39 BELLEVUE AVENUE</u> City of Tours: NEWPORT State: PL Zin: 02840 Country: USA
City or Town:     NEWPORT     State: RI     Zip: 02840     Country: USA
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS
DO NOT LIST MEMBERS       Title     Individual Name     Address
Title Individual Name Address
Title       Individual Name       Address         First, Middle, Last, Suffix       Address, City or Town, State, Zip Code, Country
Title Individual Name Address
Title     Individual Name First, Middle, Last, Suffix     Address       Address, City or Town, State, Zip Code, Country

**Signed this 29 Day of October, 2008 at 11:44:34 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By <u>DAVID J LITTLE</u> Signature of Authorized Person

Form No. 632 Revised 09/07

 $\ensuremath{\textcircled{\sc 0}}$  2007 - 2008 State of Rhode Island and Providence Plantations All Rights Reserved