

A. Raiph 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&c)) is subject to a penalty fee of \$25.00.

| (R.I.G.L. 7-16-66 (b&c)) i | s subject to a penalty fee of \$25.0 | 0. | | | | |
|---|--|--|---|--------------|----------------------|--|
| 1. ID No. 114099 | 2. Exact name of the limited li Aspen Holdings, LLC | eact name of the limited liability company pen Holdings, LLC | | | | |
| 3. State of Formation 4. Brief description of the character of the husiness Investment Real Estate | | | wbich is actually conducted in Rhode Island | | | |
| 5. Principal office address 70 Jefferson Blvd. | | | City Warwick | State RI | 7 <i>ip</i> 02888 | |
| 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAM Contact Name Paul B. Giannini | | | AE OR TITLE OF CONTACT PERSON: Contact Title Member | | | |
| Street Address 159 Poppasquash Road | | | City Bristol | State RI | zφ 02809 | |
| Manager Name | | ACES BEFORE USING A | V | RATTACHMENT) | | |
| Street Address POPPASQUASH ROAD | | | Street ASTRESS POPPASANS)+ ROAD | | | |
| BRASTOL | State | 0280g | BRISTIL | State I | 200809 | |
| Manager Name | | | Manager Name | | | |
| Street Address | | | Street Address | | | |
| City | State | Zip | 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 | | | | | | |
| <u> </u> | | | | | UI V | |

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

114099

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.

_ faul f

PAUL B. GIANNINI

Print or Type Name of Authorized Person