

File Date

Check No.

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SEP 1 5 2009

FOR SECRETARY OF STATE USE ONLY

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 2009

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.

313149		aldwin Tire, LLC				
State of Formation 4. Brief description of the character of the busine			business which is actually conducted in Rhode	: Island	<u> </u>	
			aintain, manage, lease, develop and sell real estate.			
5. Principal office add	tress		City	State	Zip	
420 Broadway			Pawtucket	RI	02860	
5. MAILING ADD	RESS OF LIMITED LIAB	BILITY COMPANY AN	D NAME OR TITLE OF CONTACT	PERSON:	,	
Contact Name			Contact Title	Contact Title		
Dennis Baldy	WIN		Member			
Street Address			City	State	Zip	
420 Broadway			Pawtucket	RI	02860	
Aanager Name	FILL IN	SPACES BEFORE US	ED LIABILITY COMPANY, IF APPL ING ATTACHMENTS ("X" BOX FOR	ICABLE - <u>DO NOT I</u> R ATTACHMENT)]	LIST MEMBERS	
.,,			Manager Name			
ireet Address			Manager Name Street Address	·		
treet Address	State	Zip	· ·	State	Zip	
ireet Address Uy	State	Zφ	Street Address	State	Zip	
ireet Address Ity Janager Name	State	Zip	Street Address City	State	Ζip	
	State State	Zip	Street Address Gity Manager Name	State State	Zφ Ζψ	
Tity Hanager Name Treet Address Try Treet Address	State NT IN RHODE ISLAND	Zip	Street Address City Manager Name Street Address	State	Zip	

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 a including any accompanying schedules a contained herein are true and correct.	ffirm that I have examined this report and statements, and that all statement
Dan Rale	9/3/04

Dennis Baldwin

Signature of Authorized Person

Print or Type Name of Authorized Person

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