



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

A. KAIPPO MOUS, 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)(7)) is subject to a penalty fee of \$25.00.

1. ID No. 81019		2. Exact name of the limited liability company HAAS REALTY, LLC	
3. State of Formation Rhode Island		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE INVESTMENT	
5. Principal office address 745 Beach View Dr P.O. Box 1817		City BOCA GRANDE	State FLORIDA
		Zip 33921	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name JAMES E HAAS		Contact Title MANAGING PARTNER	
Street Address 745 Beach View Dr.		City BOCA GRANDE	State FLORIDA
		Zip 33921	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - <b>DO NOT LIST MEMBERS</b> FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		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			

JOHN A. MURPHY, ESQ  
77 NARRAGANSETT AVENUE JAMESTOWN, 02835-01149

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

File Date	FILED
Check No.	OCT 14 2009
By:	1098
FOR SECRETARY OF STATE USE ONLY	

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.

James E Haas Oct 2 2009  
Signature of Authorized Person Date  
JAMES E. HAAS  
Print or Type Name of Authorized Person