



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

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)(7c)) is subject to a penalty fee of \$25.00.


1. ID No. 153186		2. Exact name of the limited liability company Narragansett Medical Building Associates, LLC			
3. State of Formation RI		4. Brief description of the character of the business which is actually conducted in Rhode Island To own, lease and sell real property			
5. Principal office address 360 Kingstown Road			City Narragansett	State RI	Zip 02882
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Kenneth J. Hathaway, D.O.			Contact Title President		
Street Address 360 Kingstown Road			City Narragansett	State RI	Zip 02882
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) <input type="checkbox"/>					
Manager Name Kenneth J. Hathaway, D.O.			Manager Name James J. Murdocco, M.D.		
Street Address 360 Kingstown Road			Street Address 360 Kingstown Road		
City Narragansett	State RI	Zip 02882	City Narragansett	State RI	Zip 02882
Manager Name Stephen Maguire, D.O.			Manager Name Anne M. Hebert, M.D.		
Street Address 360 Kingstown Road			Street Address 360 Kingstown Road		
City Narragansett	State RI	Zip 02882	City Narragansett	State RI	Zip 02882
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					

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

153186

File Date	FILED
Check No.	OCT 14 2009
By:	7077
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.


Signature of Authorized Person Date 9/30/09
Kenneth J. Hathaway, D.O.
Print or Type Name of Authorized Person