

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.

1. ID No. 116466	2. Exact name of the limited liability company Orange/Friendship Partners, LLC					
3. State of Formation Rhode Island	a. Brief descrip To own, c	tion of the character of the perate, lease, rent	istness which is actually conducted in Rhode Island and purchase Real Estate			
5. Principal office address 1080 Main Street		-	City Pawtucket	State RI	Ζip 02860	
Jonathan N. Savag		BILITY COMPANY AN	ND NAME OR TITLE OF CONTAC Contact Title Attorney	CT PERSON:	102000	
Street Address 1080 Main Street			<i>cin</i> Pawtucket	State RI	Zip 02860	
7. NAME AND ADDR  Manager Name  None	ESS OF EACH MANA	AGER OF THE LIMIT SPACES BEFORE US	FED LIABILITY COMPANY, IF AP SING ATTACHMENTS ("X" BOX   Manager Name	PPLICABLE - <u>DO NOT</u> FOR ATTACHMENT)	LIST MEMBERS	
Street Address			Street Address			
Сиу	State	Zψ	Сіцч	State	Zip	
Manager Name	Manager Name			I		
Street Address			Street Address			
Сцу	State	Zip	Сцу	State	Zip	
8. RESIDENT AGENT This information is curr	IN RHODE ISLAND rently of record in the	I Office of the Secretary	; y of State. Changes require filing of	  Form 642 - R.I.G.L. 7-1	6-11	

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

116466

File Date	FILED	
Check No.	OCT 2 3 2009	<del></del>
Ву:В	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.

Autorized Person

Jonathan N. Savage, Member

Print or Type Name of Authorized Person