

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222,3046

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 (be	(TC)) is subject to	a penaky fee of \$	25,00.				
1. ID No. 487152	2. Exact HPG,	ct name of the limited liability company , LLC					
3. State of Formation 4. Brief description of the character of the busine Own and manage real estate				ness which is actually conducted in Rhode Island			
5. Principal office address One Ship Street				City Providence	State RI	Ζψ 02903	
6. MAILING AD Contact Name Ross Banfield	DRESS OF L	IMITED LIAB	SILITY COMPANY ANI	O NAME OR TITLE OF CONTAC Contact Title	CT PERSON:	1	
Street Address 13897 Willard Road				<i>сиу</i> Chantilly	State VA	<i>Zip</i> 20151	
7. NAME AND A	DDRESS OF	EACH MANA FILL IN	AGER OF THE LIMITE SPACES BEFORE USI	D LIABILITY COMPANY, IF AING ATTACHMENTS ("X" BOX	PPLICABLE - DO NOT FOR ATTACHMENT)		
Manager Name Ross Banfield				Manager Name	Manager Name		
Street Address same as above)			Street Address			
City		State	Zip	City	State	Zip	
Manager Name				Manager Name	Manager Name		
Street Address				Street Address	Street Address		
City		State	Zip	City	State	Zip	
B. RESIDENT ACT				of State. Changes require filing of	f 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).

487152

File Date	FILED
Check M	OV 0 9 2009
^{By} By_	11140

Under penalty of perjury, I declare and affirm that I have examined this repor including any accompanying schedules and statements, and that all statement contained herein are true and correct.

Signature of Authorized Person

Date

Ross Banfield