Filing Fee: \$50.00

To be filed annually between September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

## LIMITED LIABILITY COMPANY

LIMITED ENGINEERING		
ID	Number LL 92623	Annual Report for the year 1999
1.	The name of the limited liability company is:	
2.	The address of the principal office of the limite	d liability company is:
3. 4.	The state or other jurisdiction under the laws of the name and address of its resident agent is	
5.	101 DYER STREET PROVIDENCE, RI 029  The current mailing address of the limited liab	oility company and the name or title of a person to whom communications
J.	hay be directed are:John D. Biafore, 101 Dyer Street, Providence, RI 02903	
6. 7.	state: buying, selling and ho	the name and address of each manager of the limited liability company
Ι.	Name  Edmund D. Fuller, III	Address  491 Kilvert Street, Warwick, RI 02886
C	Dated 9/29 /99  * 9 2 6 2 3 *	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.  LAKESHORE ASSOCIATES LLC  Exact Name of Limited Liability Company
C	FOR SECRETARY OF STATE USE ONLY ille Date: 10-6-99 Check No.: 364/ By:	EDMUND D. FULLER, III, Partner  Title  Form No. 632 Revised 01/99