



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 02904-2600
401.222.3000

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2009

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00

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. 155900		2. Exact name of the limited liability company DRUM ROCK 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	
5. Principal office address 45B Wilclair Street		City Warwick	State RI
		Zip 02886	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name James Waterman		Contact Title Member	
Street Address 8 Jonathan Lane		City Sandwich	State MA
		Zip 02563	
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		Manager Name	
Street Address		Street Address	
City	State	City	State
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name JOHN LEDOUX		Address	
Address 1006 CHARLES STREET		City NORTH PROVIDENCE	Zip 02904-

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

FILED

File Date JUL 22 2010

Check No. BY 1064 & 1071

By: _____

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.

X James C. Waterman
Signature of Authorized Person Date

James Waterman
Print or Type Name of Authorized Person