



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 2010

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. 142115	2. Exact name of the limited liability company NEW ENGLAND REAL ESTATE HOLDING GROUP, LLC
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3. State of Formation RI	4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE INVESTMENT
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5. Principal office address 1481 WAMPANOAG TRAIL	City EAST PROVIDENCE	State RI	Zip 02915
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6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:	
Contact Name MARTIN P. SLEPKOW	Contact Title MANAGER

Street Address 1481 WAMPANOAG TRAIL	City EAST PROVIDENCE	State RI	Zip 02915
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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)

Manager Name MARTIN P. SLEPKOW	Manager Name NONE
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Street Address 1481 WAMPANOAG TRAIL	Street Address
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City EAST PROVIDENCE	State RI	Zip 02915	City	State	Zip
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Manager Name NONE	Manager Name NONE
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Street Address	Street Address
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City	State	Zip	City	State	Zip
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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).

142115

File Date 9-24-2010
Check No. 6136
By: MPC
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.

MPC 9/16/10
Signature of Authorized Person Date

MARTIN P. SLEPKOW
Print or Type Name of Authorized Person