RI SOS Filing Number: 201071075700 Date: 10/26/2010 4:00 PM

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.	2. Exact name of the limited liability company		
148410	Coastal Care Realty, LLC		
3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island		
Rhode Island	Real estate holding company		
5. Principal office address	City	State	Zip
10 Davol Square, Suite 400	Providence	RI	02903

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title		
George W. Babcock	Manager		
Street Address	City	State	Zip
10 Davol Square, Suite 400	Providence	RI	02903

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	Street Address	City	State	Zip
George W. Babcock	10 Davol Square, Suite 400	Providence	RI	02903
Manager Name	Street Address	City	State	Zip
Steven Brin, M.D.	10 Davol Square, Suite 400	Providence	RI	02903
Manager Name	Street Address	City	State	Zip
Joseph Campbell, M.D.	10 Davol Square, Suite 400	Providence	RI	02903
Manager Name	Street Address	City	State	Zip
Larry Schoenfeld, M.D.	10 Davol Square, Suite 400	Providence	RI	02903

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

2010 OCT 26 P 12:48

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

148410

FILED

File Date OCT 26 2010

Check No. By MNC

By: 004191

FOR SECRETARY OF STATE USE ONLY

54870-7-562352

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.

9/14/2010

Signature of Authorized Person *Date*

George W. Babcock

Print or Type Name of Authorized Person

Form 632 Rev. 08/08

COASTAL CARE REALTY, LLC

Attachment to 2010 Annual Report
Continued List of Managers

Meryl Moss, MPA 10 Davol Square, Suite 400 Providence, RI 02903
Robert Cicchelli, M.D. 10 Davol Square, Suite 400 Providence, RI 02903