

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

1. ID No. 149868		ct name of the limited liability company e van der Wal Photograph Gallery, LLC				
		isiness which is actually conducted in Rhode Island				
5. Principal office address One Bannister's Wharf			City Newport	State RI	Zip	
6. MAILING ADDR Contact Name Tenley van der W		ILITY COMPANY AN	ND NAME OR TITLE OF CON	ITACT PERSON:	02840	
Street Address One Bannister's Wharf			City Newport	State RI	^{Zip} 02840	
Manager Name	PRESS OF EACH MANA FILL IN	GER OF THE LIMIT SPACES BEFORE US	ED LIABILITY COMPANY, IF ING ATTACHMENTS ("X" B Manager Name	FAPPLICABLE - <u>DO NO</u> OX FOR ATTACHMENT)		
Street Address			Street Address	· · · · · · · · · · · · · · · · · · ·		
City	State	Zip	City	State	Zip	
Manager Name		······.l	Manager Name			
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
3. RESIDENT AGENT Finis information is cu	T IN RHODE ISLAND arrently of record in the (Office of the Secretary	e of State. Changes require filing	I g of Form 642 - R.I.G.L. 7-1	[6-1]	

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

149868

File Date	FILED
Check No.	OCT 29 2010
Ву:	By MMC
I	FOR SECRETARY OF STATE OF AND

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.

Signature of Authorized Person

Tenley van der Wal

Print or Type Name of Authorized Person