

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 2011

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 (h&c)) is subject to a penalty fee of \$25.00.

(R.I.G.L. 7-16-66 (b&c)) is		· · · · · ·					
1 1D No. 126642		name of the limited liability company DRTMAN REALTY, L.L.C.					
3. State of Formation		4. Brief description of the character of the business which is actually conducted in Rhode Island					
RHODE ISLAND REAL PROPERTY OWNERSHIP				AND MANAGEMENT			
5. Principal office address 75 NEW ROAD				EAST PROVIDENCE	State R1	Ζip 029 16	
6. MAILING ADDRESS Contact Name DANIEL T WORTM		MITED LIABI	ILITY COMPANY AND	NAME OR TITLE OF CONTACT PI	RSON:	·	
Street Address				Gity	MANAGER City State Zip		
75 NEW ROAD				EAST PROVIDENCE	RI	02916	
7. NAME AND ADDRI	ESS OF			LIABILITY COMPANY, IF APPLIC G ATTACHMENTS ("X" BOX FOR		OT LIST MEMBERS	
Manager Name DANIEL T WORTMAN				Manager Name	:		
Street Address 75 NEW ROAD				Street Address	Street Address		
EAST PROVIDENC	E	State R1	^{Zip} 02916	City	State	Zip	
Manager Name				Manager Name	Manager Name		
Street Address				Street Address	Street Address		
City		State	Zip	City	State	Zψ	
8. RESIDENT AGENT	IN RH(DDE ISLAND	I - DO NOT ALTER - Cha	; anges require filing of Form 642	1 2 - R.I.G.L, 7-1	 6-11	
Agent Name				Address		•	
DENNIS R. GANNON				1140 RESERVOIR AVE	1140 RESERVOIR AVENUE, SUITE 3A		
Address				City	City:		
				CRANSTON		02920	

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

1 26642				
FILED	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.			
File Date OCT 03 2011				
Check No	Signature of Authorized Person Date Daniel Wortman			
FOR SECRETARY OF STATE USE ONLY	Print or Type Name of Authorized Person			