

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* - 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 (here)) is subject to a penalty for of \$25.00.

1. ID No. 157521		2. Exact name of the limited liability company Fox Hill Realty Trust Three, LLC				
3. State of Formation A. Brief description of the character of the business what Acquisition, development, ownership, property.			ness which is actually conducted in R ship, leasing, lending or b	bich is actually conducted in Rhode Island , leasing, lending or borrowing, operating & disposing of real		
5. Principal office address 183 Eustis Avenue			City Newport	State RI	<i>Ζίμ</i> 0 284 0	
6. MAILING AD	DRESS OF LIMITED LIAB	ILITY COMPANY AND I	NAME OR TITLE OF CONTAC	CT PERSON:	•	
Contact Name			Contact Title	Contact Title		
Joseph M. Tomaino			Manager	Manager		
Street Address			City	State	Zip	
183 Eustis Avenue			Newport	RI	02840	
Manager Name Joseph M. Tomaino Street Address 183 Eustis Avenue			Manager Name None Street Address	None		
		Lai	-3:			
City	State RI	2ip 02840	City	State	Zip	
Newport	Manager Name None			Manager Name None		
Manager Name			•			
Manager Name			•			
Manager Name None	State	Zip	None	State	Zip	
Manager Name None Street Address City	State GENT IN RHODE ISLAND		None Street Address	State	Zip	

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

157521	
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
File Date 0CT 13 2011	contained herein are true and correct.
Check No. By 35	Signature of Authorized Person Date
FOR SECRETARY OF STATE USE ONLY	Joseph M. Tomaino Print or Type Name of Authorized Person