



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
401.222.3046

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

1. ID No. 555238	2. Exact name of the limited liability company New Property Management, LLC.
---------------------	---

3. State of Formation RHODE ISLAND	4. Brief description of the character of the business which is actually conducted in Rhode Island FOR THE ACQUISITION, MAINTENANCE AND SALE OF REAL PROPERTY
---------------------------------------	---

5. Principal office address 41 Harrison Street	City Pawtucket	State RI	Zip 02860
---	-------------------	-------------	--------------

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Edgar Almeida	Contact Title MANAGER		

Street Address 41 Harrison Street	City Pawtucket	State RI	Zip 02860
--------------------------------------	-------------------	-------------	--------------

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 <i>J. S.</i>	Manager Name
Street Address	Street Address
City <i>Pawtucket</i>	City
State <i>RI</i>	State
Zip <i>02860</i>	Zip
Manager Name	Manager Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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).

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2011 OCT 21 AM 11:53

555238

FILED

File Date _____
Check No. OCT 21 2011
By: CE 154851
BY _____
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 statement contained herein are true and correct.

Edgar Almeida (0-1)-11
Signature of Authorized Person Date
EDGAR ALMEIDA
Print or Type Name of Authorized Person