



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>000518746</u>		2. Exact name of the limited liability company <u>Highland Estates LLC</u>			
3. State of Formation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Development</u>			
5. Principal office address <u>GMR LLP 376 Boylston Street</u>		City <u>Boston</u>	State <u>MA</u>	Zip <u>02116</u>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OF CONTACT PERSON					
Contact Name <u>Erik Potter</u>		Contact Title <u>Registered Agent</u>			
Street Address <u>GMR LLP 376 Boylston Street</u>		City <u>Boston</u>	State <u>MA</u>	Zip <u>02116</u>	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name <u>Steven Ross</u>		Manager Name			
Street Address <u>GMR LLP 376 Boylston Street</u>		Street Address			
City <u>Boston</u>	State <u>MA</u>	Zip <u>02116</u>	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

APR 25 2012

File Date _____
 Check No _____
 By _____
 FOR SECRETARY OF STATE USE ONLY

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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 [Signature] Date 4/17/12
 Print or Type Name of Authorized Person Steven Ross