

## 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. 422958	2. Exact name of the limited liability company TC Healthcare I, LLC								
3. State of Formation DE	4. Brief des Real est	4. Brief description of the character of business conducted in Rhode Island Real estate investment							
5. Principal office address 200 International Circle #3500			City Hunt Valley	State MD	Zip 21030				
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Contact Name Tim Coburn			Contact Title President						
Street Address 200 International Circle #3500			City Hunt Valley	State MD	Zip 21030				
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Manager Name Tim Cobosco			Manager Name	Manager Name					
Street Address	per l	_N	Street Address						
Glastonbury	State	Zip O(v0	33 City	State	Zip				
Manager Name			Manager Name	Manager Name					
Street Address			Street Address	Street Address					
City	State	Zip	City	State	Zip				
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This information is currently	of record in the	Office of the Secn	etary of State. Changes require f	ing Form 642.	<u> </u>				

		Under penalty of perjury, I declare and affirm that I have exact this report, including any accompanying schedules and state and that all statements contained herein are true and correct that all statements contained herein are true and correct that all statements contained herein are true and correct that all statements contained herein are true and correct that all statements are true and correct that	emente
eg en	JUN 2 9 2012	Signature of Authorized Person Date	e
	10117	Print or Type Name of Authorized Person	<del></del>

Form No. 632 Revised: 01/2012