

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 2012

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. 532016		2. Exact name of the limited liability company DGR Properties, LLC					
3. State of Formation		Brief description of the character of business conducted in Rhode Island Real Estate					
i. Principal office address 15 Pinecrest Drive			City Johnston	State RI	Zip 02919		
6. MAILING ADDRESS OF	F LIMITED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:			
Contact Name Joseph D'Agostino			Contact Title Managing Partner				
Street Address 15 Pinecrest Drive			City Johnston	State RI	Zip 02919		
7 LIST ALL MANAGERS	ALANEC AND AD	ADECCEC! AE THE		F ADDITION DO	1100 1100 1		
("X" BOX FOR ATTACH	(MAMES AND AUL IMENT)	ALCOSES) OF THE	LIMITED LIABILITY COMPANY,	if applicable - <u>Do</u>	NOT LIST MEMBE		
(A BOX FOR AT IAC	IMENT)	nesses) or the	Manager Name	IF APPLICABLE - <u>DO</u>	NOT LIST MEMBE		
Manager Name	(MANES AND ADI	7.E33E3, VF 1 NE		FAPPERABLE - DO	NOT LIST MEMBE		
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("X" BOX FOR ATTACH Manager Name Street Address City Manager Name Street Address City City R. RESIDENT AGENT IN F	State	Zip	Manager Name Street Address City Manager Name Street Address	State	Zip		

File Date	FILED	Under penalty of perjury, I declare and at this report, including any accompanying	schedules and statements.
Check No	AUG 2 7 - 201	and that all statements contained herein	are true and correct.
Ву:	BY_1509	Signature of Authority Person	Date
FOR SECRETARY OF STATE USE ONLY		Print or Type Name of Authorized Person	

Form No. 632 Revised: 01/2012