| RALPH MOLL  | State of Rhode Island and Prov<br>Office of the Secretar |  |
|---|--|--|
|   | Division Of Business                                     | Services   |
| 148 W. River Street   |  |  |
| Providence RI 02904-2615  |  |  |
| retary of St  | (401) 222-304  | 0  |
| Limited Liability Co  | ompany   |  |
| Annual Report<br>Filing Period: September   | r 1 - November 1   |  |
|   |  |  |
| 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.   |  |  |
| ANNUAL REPORT YEA   | NR: <u>2012</u>  |  |
| 1. ID No. <u>0001213</u>  | <u>76</u>  |  |
| 2. Exact Name of the Limited Liability Company Winn Management Company LLC  |  |  |
| 3. State of Formation   |  |  |
|   |  |  |
| State: <u>DE</u>  |  |  |
|   | the Character of the Business Which PERTY MANAGEMENT     | is Actually Conducted in Rhode Island                  |
| 5. Principal Office Add   | dress  |  |
| No. and Street: 6 FANEUIL HALL MARKETPLACE  |  |  |
|   | TON  | State: MA Zip: 02109 Country: USA                      |
|   |  | 5440. <u>1411</u> Lp. <u>02107</u> County: <u>0511</u> |
| 6. Mailing Address of   | Limited Liability Company and Name                       | or Title of Contact Person:                            |
| Contact Name: Contact   | ct Title:  |  |
|   | NEUIL HALL MARKETPLACE                                   |  |
| City or Town: BOS   | TON  | State: <u>MA</u> Zip: <u>02109</u> Country: <u>USA</u> |
| 7. Name and Address<br>DO NOT LIST MEME   | of Each Manager of the Limited Liabi<br>BERS             | lity Company, if Applicable.                           |
| Title   | Individual Name  | Address  |
|   | First, Middle, Last, Suffix                              | Address, City or Town, State, Zip Code, Country        |
| MANAGER   | WINN RESIDENTIAL MANAGER CORP.                           | 6 FANEUIL MALL MARKETPLACE<br>BOSTON, MA 02109 USA     |
|   |  |  |
|   | N RHODE ISLAND - DO NOT ALTER                            |  |
| •••••••   | ling of Form 642 - R.I.G.L. 7-16-11                      |  |
| CT CORPORATION SYSTEM 10 WEYBOSSET STREET PROVIDENCE, RI 02903  |  |  |
| OT COM CIATION STSTENI TO WEIDOSSET STREET FROMDENCE, RI 02903  |  |  |

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

**Signed this 26 Day of September, 2012 at 11:08:31 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By <u>SAMUEL ROSS</u> Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$  2007 - 2012 State of Rhode Island and Providence Plantations All Rights Reserved