

## 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

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## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2009

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. 156545	2. Exact na <b>Jenmar</b>	ne of the limited liability Properties III LLC	company					
3. State of Formation  Rhode Island		4. Brief description of the character of business conducted in Rhode Island Investments in real property and any other lawful purpose				2013 A	2000 1930 1930	
5. Principal office address			City	State	Zip	AUG 2		
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND NA	ME OR TITLE OF CONTACT	PERSON:		w ·	Section 2	
Contact Name Louis P. Filippelli			Contact Title  Manager	Manager = 57				
Street Address 175 Metro Center Blvd Warwick, RI 02886			City <b>Warwick</b>	State RI	Zip 0288	<del>ن</del> 6	0.2	
7. LIST <u>ALL</u> MANAGERS ( ("X" BOX FOR ATTACHI		RESSES) OF THE LIM	IITED LIABILITY COMPANY,	IF APPLICABLE - DO	NOT LIST N	AEMB	ERS	
Manager Name Louis P. Filippelli			Manager Name	Manager Name				
Street Address 175 Metro Center Blv	/d Warwick, R	02886	Street Address					
City <b>Warwick</b>	State RI	Zip 02886	City	State	Zip			
Manager Name			Manager Name	Manager Name				
Street Address			Street Address	Street Address				
City	State	Zip	City	State	Zip	•• •		
8. RESIDENT AGENT IN RI	HODE ISLAND	· · · · · · · · · · · · · · · · · · ·					***************************************	
This information is current	lly of record in the	Office of the Secreta	ry of State. Changes require	filing Form 642.				

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BY 12 204753

File Date	this report, including any accompanyir and that all statements contained here	ng schedules and statements
Check No	and that all states lettles contained liefe	08/06/2013
Ву:	Signature of Authorized Person	Date
FOR SECRETARY OF STATE USE ONLY	Louis P. Phippelli	
FOR SECRETARY OF STATE USE UNLY	Print or Type Name of Authorized Person	

Form No. 632 Revised: 01/2012