

## 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 2013

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. 000788577		2. Exact name of the limited liability company DBH Realty, LLC								
3. State of Formation		Brief description of the character of business conducted in Rhode Island								
RI	Acquire	Acquire and develop real estate								
5. Principal office address P.O. Box 17306			City Smithfield	State RI	Zip <b>02917</b>					
6. MAILING ADDRESS OF L	IMITED LIABILI	Y COMPANY AND	NAME OR TITLE OF CONTACT F	PERSON:						
Contact Name  David B. Harris			Contact Title Member							
Street Address P.O. Box 17306			City Smithfield	State RI	Zip <b>02917</b>					
7. LIST <u>ALL</u> MANAGERS (N ("X" BOX FOR ATTACHM	AMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY, I	FAPPLICABLE - <u>Do</u>	NOT LIST MEMBERS					
Manager Name N/A			Manager Name							
Street Address			Street Address	Street Address						
City	State	Zip	City	State	Zip					
Manager Name			Manager Name							
Street Address			Street Address							
City	State	Zip	City	State	Zip					
6. RESIDENT AGENT IN RHO										
This information is currently	of record in the	e Office of the Sec	retary of State. Changes require	filing Form 642.						

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Ву:					
	CRETA	RY OF	STATE L	JSE ONI	Y

Form No. 632 Revised: 01/2012 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 be ein are true and correct.

Signature of Authorized Person

//-/-/3 Date

David B. Harris

Print or Type Name of Authorized Person