

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 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. 127854	2 Exact name 166 Valle	2 Exact name of the limited liability company 166 Valley Street LLC							
3. State of Formation	4. Brief dese	Brief description of the character of business conducted in Rhode Island Real estate development							
MD	Real est	ite developmen							
5. Principal office address 1040 Hull Street, Suite 1			City Baltimore	State MD	Zip 2123 0				
6 MAILING ADDRESS OF LIMITED LABILITY COMPANY AND N Contact Name Carl W. Struever			AMEORITE EOE CONTACT PERSON: Contact Title Manager						
Street Address 1040 Hull Street, Suite 1			City Baltimore	State MD	Zip 21230				
7 LIST ALL MANAGERS (N - (*X=BOX EOR ATTACHM	AMES AND ADD	IFIESES) OF THE	EMITED LIABILITY COMPANY.	FAPPLICABLE DO	NOT CIST MEMB	ERS			
Manager Name			Manager Name	Manager Name					
Street Address			Street Address	Street Address					
City	State	Zip	City	State	Zip 🕏	37			
Manager Name			Manager Name						
Street Address			Street Address	Street Address					
City	State	Zip	City	State	Zip : 06	DV.			
8 RESIDENT AGENTINAH									
This information is currently	y of record in the	Office of the Sec	retary of State. Changes require	filing Form 642.					

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	OF STATE	
FOR SECRETARY		

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 that ements contained herein are true and correct.

Authorized Person Signature of

Date

3 He Print or Type Name of Authorized Person