

## 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 2014

Filing Period: September 1 - November 1 · This report must be typed or printed legibly.

1. Entity ID No. <b>803187</b>		2. Exact name of the limited liability company WOONSOCKET INDUSTRIAL COMPLEX LLC				
3. State of Formation RHODE ISLAND	<b>I</b>	•	cter of business conducted in Rho agement of storage facili			
5. Principal office address 7 Woodrow Drive			City <b>Yonkers</b>	State NY	Zip 10710	
Contact Name  JOSEPH RAHEB		All the second of the second o	Contact Title ATTORNEY			
Street Address 650 WASHINGTON HWY.			City LINCOLN	State RI	Zip <b>02865</b>	
7. LIST ALL MANAGERS ("X" BOX FOR ATTACH	() (AMES AND ADI MENT)	XREGSES) OF THE	LABELTY COMPANY	FAPPLICABLE : DO		
Manager Name NONE			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name	•		Manager Name	1		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN R	HODERLAND:					
This information is curren	ntly of record in the	e Office of the Secr	etary of State. Changes requir	e filing Form 642.	Cm A	
FILED SEP 2 4 2014					RECEIVED RETARY OF STATI REPORATIONS DIV	
BY	1436				14 ME	

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements equialized herein are true and correct.

**ROBERT E. FEDIGAN** 

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012