

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 2014

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. 109140	Maple Re	2. Exact name of the limited liability company Maple Realty, LLC								
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Real Estate Investment and Leasing								
5. Principal office address One Wellington Road			City Lincoln	State RI	Zip 02865					
6, MAILING ADDRESS OF Contact Name Kevin M. Daley, Esq		Y COMPANY AND	NAME OR TITLE OF CONTACT Contact Title Attorney							
Street Address 300 Jefferson Boulevard, Suite 105			City Warwick	State RI	Zip 02888					
7. LIST ALL MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADD MENT) []	RESSES) OF THE	LIMITED LIABILITY COMPANY	IFAPPLICABLE - <u>Do</u>	NOT LIST MEMBERS					
Manager Name			Manager Name	Manager Name						
Street Address			Street Address	Street Address						
City	State	Zip	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 R	HODE ISLAND	Office of the Sec	retary of State. Changes requi	re filing Form 642						
Inis information is currer	iny or record in th	e Office of the Sec	retary or otate. Orlanges requi	g r						

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Form No. 632 Revised: 01/2012 Under penalty of perjury, declare and affirm that there examined this report including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Person

Len Gemma

Print or Type Name of Authorized Person