

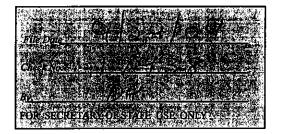
Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TY	PED OR PRIN	TED IN BLACK)					
<i>I. ID No.</i> 115600		2. Exact name of the limited liabilty company FJB Associates, LLC					
3. State of Formation		•	of the character of the husing	ss which is actually conducted in Rh	ada faland		
Delaware Home Improvements (Replacement				·			
5. Principal office address 55 Town Line Road				City Wethersfield	State CT	<i>Zip</i> 06109	
Contact Name	til terretigte i distri	$g^{\frac{1}{2}}(x,t)=b^{-1}(x)f_{\frac{1}{2}}$	Programme States to the con-	Contact Title	7. 克克克克 20.0克姆克克		
Dennis J. Caffrey				.Controller			
Street Address 55 Town Line Road				City .Wethersfield	State CT	<i>Zip</i> 06109	
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Manager Name Frank J. Bocian Jr.				• Manager Name •			
Street Address				Street Address			
244 Joshuatov	m Poad			• Street Address			
City	Sta	ite	Zip	*City	State	Zip	
Lyme	C'	Г	06371	• ′			
Manager Name				Manager Name			
Street Address				• Street Address			
City	Sta	te	Zip	City	State	Zip	
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Agent Name				Address		·	
Corporation Serv	rice Compa	пу					
Address				City	Zip		
222 Jefferson Boulevard, Suite 200				Warwick, RI	ick, RI 02888		
					•		

This report must be signed in ink by an authorized person pursuant to 7-16-66.





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 herein are true and correct.

Print or Type Name of Authorized Person