

Filing Fee: \$50.00

To be filed annually between  
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Corporations Division  
100 North Main Street Providence, Rhode Island 02903-1335  
Telephone (401) 222-3040

**LIMITED LIABILITY COMPANY**

ID Number DLLC 109500

Annual Report for the year 2001

1. The name of the limited liability company is:  
Rhode Island Assisted Living Management, LLC
2. The address of the principal office of the limited liability company is:  
670 NORTH MAIN ST PROVIDENCE, RI 02904
3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND
4. The name and address of its resident agent is: PAUL S. DAVENPORT  
DAVENPORT ASSOCIATES, LTD. 670 NORTH MAIN STREET PROVIDENCE RI 02903
5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: 670 NORTH MAIN ST PROVIDENCE, RI 02904  
LUCILLE MASSEMINO
6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: ASSISTED LIVING
7. If the limited liability company has managers, the name and address of each manager of the limited liability company  

Name	Address
<u>RACHAEL ROBILLOARD RN.</u>	<u>410 WEBSTER AVE CRANS 02920</u>

Dated 9/4/01



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.

RHODE ISLAND ASSISTED LIVING MANAGEMENT LLC  
Exact Name of Limited Liability Company

By LUCILLE MASSEMINO

PRES.

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 9-17-01

Check No.: 6175

By: