State of Rhode Island and Providence Plantations Fee Office of the Secretary of State			
Division Of Business Services			
148 W. River Street Providence RI 02904-2615			
(401) 222-3040			
Limited Liability Company Annual Report			
Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing			
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-			
16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2016			
1. ID No. <u>000795156</u>			
2. Exact Name of the Limited Liability Company Dorries Cove LLC			
3. State of Formation			
State: <u>SD</u>			
Using the following NAICS and a places extent the and that heat describes your business			
Using the following NAICS codes, please select the code that best describes your business.			
NAICS Code		6 53	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
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OWNERSHIP AND RENTAL OF REAL ESTATE.			
5. Principal Office Address			
No. and Street: C/O SCHOONER CAPITAL LLC			
	UTH STREET, SUITE 1120		
City or Town: BOST	<u>ON</u>	State: <u>MA</u> Zip: <u>02111</u> Co	untry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>STEPHEN D. MAIOCCO</u> Contact Title: <u>CFO OF MANAGER</u>			
No. and Street: C/O SCHOONER CAPITAL LLC			
<u>60 SOUTH STREET, SUITE 1120</u> City or Town: <u>BOSTON</u> State: <u>MA</u> Zip: <u>02111</u> Country: <u>USA</u>			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip (Code, Country
MANAGER	SCHOONER CAPITAL LLC	60 SOUTH STREET, SU	JITE 1120

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 26 Day of September, 2016 at 1:49:12 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By STEPHEN D. MAIOCCO

Signature of Authorized Person

Form No. 632 Revised 09/07

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