State of Rhode Island and Providence Plantations Department of State - Business Services Division	
Annual Report for the year: Limited Liability Company → Filing period: September 1 - November 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by December 1.	

Entity ID Number	2. Exact	name of the Li	imited Liability Company				
1018640	EVERG	REEN PARK R	REALTY, LLC				
3. NAICS Code .							
53 - Real Estate and Rental a	To cond	Brief description of the character of business conducted in Rhode Island To conduct a real estate business in the State of Rhode Island.					
5. State of Formation	7						
RI							
6. Principal Office Address		<u> </u>	City	Tour			
3 Brantwood Road -	1 *		Arlington	State MA	Zip 02476		
7. Mailing Address of Limited Li	ability Comp	any and Name	or Title of Contact Person				
Contact Name Richard H. Gregory III				Contact Title Registered Agent			
Street Address 144 Wayland Ave			City Providence	State Ri	Zip 02906		
8. List ALL managers (namés a	nd addresse:	s) of the Limite	d Liability Company, IF APPLICAL	RIE-DO NOTUET	MEMPERA		
Manager Nan .0s		Manager Name	Manager Name				
Street Address ,		Street Addre	Street Addre.				
City Ar	State	1	City .				
Manager Name		Manager Name	Manager Name				
treet Address			Street Address				
ity	Char	T					
	State	Zip	City	State	Zip		
Resident Agent in Rhode Island	This inform			Check the box to in	ndicate an attachment		
nder penalty of periury I decla	nis informa	tion is currently	of record with the Department of State	. Changes require filin	g Form 642.		
	nts contain	m that I have i ed herein are	examined this report, including true and correct.	any accompanying	schedules and		
ame of Authorized Person				Date			
DEBORAH KO	KINOS	2		10/24	1201		
Insture of Authorized Person				1-104/	(016)		
TO GEL	us	SIGNE	DOCUMENT HERE				
							

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov