



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

1. ID No. 14276-112706		2. Exact name of the limited liability company Ruggieri Family Real Estate LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island Real Estate	
5. Principal office address 160 Wayland Avenue		City Providence	State RI
		Zip 02906	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Richard Ruggieri		Contact Title	
Street Address 160 Wayland Avenue		City Providence	State RI
		Zip 02906	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name Richard Ruggieri		Manager Name Same	
Street Address 160 Wayland Avenue		Street Address	
City Providence	State RI	City	State
Zip 02906		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name Charles E. Casale, Esq		Address 945 Park Avenue	
Address		City Cranston	Zip 02910

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

File Date <u>10/2/06</u>
Check No. <u>675</u>
By: <u>[Signature]</u>
FOR SECRETARY OF STATE USE ONLY

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.

[Signature] 9/27/06
Signature of Authorized Person Date
Richard Ruggieri
Print or Type Name of Authorized Person



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

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 2004

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 112706		2. Exact name of the limited liability company Ruggieri Family Real Estate LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island real estate	
5. Principal office address 160 WAYLAND AVENUE		City PROVIDENCE	State RI
			Zip 02906-
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name RICHARD RUGGIERI		Contact Title	
Street Address 160 WAYLAND AVENUE		City PROVIDENCE	State RI
			Zip 02906-
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name RICHARD RUGGIERI		• Manager Name same	
Street Address 160 WAYLAND AVENUE		• Street Address	
City PROVIDENCE	State RI	City	State
	Zip 02906		Zip
Manager Name same		• Manager Name same	
Street Address		• Street Address	
City	State	City	State
	Zip		Zip
8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name CHARLES E. CASALE, ESQ.		Address 1040 OAKLAWN AVENUE	
Address		City CRANSTON	Zip 02920-

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



1 1 2 7 0 6

*112706 DLLC 01/09/04 02:05:35 PM	
File Date	SEP 02 2004
Check No	
By:	
FOR SECRETARY OF STATE USE ONLY	

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.

Signature of Authorized Person Richard Ruggieri Date 7/13/14
Print or Type Name of Authorized Person Richard Ruggieri



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
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 2003

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No 112706		2. Exact name of the limited liability company Ruggieri Family Real Estate LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island Real Estate	
5. Principal office address 160 Wayland Avenue, Providence, RI		City Providence	State RI
			Zip 02906
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Richard Ruggieri		Contact Title	
Street Address 160 Wayland Avenue		City Providence	State RI
			Zip 02906
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name Richard Ruggieri		Manager Name same	
Street Address 160 Wayland Avenue		Street Address	
City Providence	State RI	City	State
	Zip 02906		Zip
Manager Name same		Manager Name same	
Street Address		Street Address	
City	State	City	State
	Zip		Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name CHARLES E. CASALE, ESQ.		Address	
Address 1040 OAKLAWN AVENUE		City CRANSTON	Zip 02920

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



* 1 1 2 7 0 6 *

File Date	9-22-03
Check No.	114 C C C 25
By:	fmc
FOR SECRETARY OF STATE USE ONLY	

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.

Signature of Authorized Person Date **9/19/03**

Ruggieri, Richard J
Print or Type Name of Authorized Person



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 112706		2. Exact name of the limited liability company Ruggieri Family Real Estate LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island	
5. Principal office address 160 Wayland Avenue		City Providence	State RI
		Zip 02906	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Richard Ruggieri		Contact Title	
Street Address 160 Wayland Avenue		City Providence	State RI
		Zip 02906	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name Richard Ruggieri		Manager Name	
Street Address 160 Wayland Avenue		Street Address	
City Providence	State RI	City	State
Zip 02906		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name CHARLES E. CASALE, ESQ.		Address	
Address 1040 OAKLAWN AVENUE		City CRANSTON	Zip 02920

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



* 1 1 2 7 0 6 *

File Date	10.11.02
Check No.	136
By:	Richard Ruggieri
FOR SECRETARY OF STATE USE ONLY	

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.

Richard J. Ruggieri, MD
Signature of Authorized Person Date **8/30/01**
Print or Type Name of Authorized Person

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

LIMITED LIABILITY COMPANY

ID Number DLLC 112706

Annual Report for the year 2001

- The name of the limited liability company is:
Ruggieri Family Real Estate, LLC
- The address of the principal office of the limited liability company is:
1160 Wayland Avenue, Providence, RI 02906
- The state or other jurisdiction under the laws of which it is formed is: Rhode Island
- The name and address of its resident agent is: Charles E Casale, Esq.
1040 Oaklawn, Avenue, Cranston, RI 02920
- The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Richard Ruggieri, Manager, 1160
Wayland Avenue, Providence, RI 02906
- A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Real Estate
- If the limited liability company has managers, list the name and address of each manager:

Name	Address
<u>Richard Ruggieri</u>	<u>1160 Wayland Avenue, Providence, RI 02906</u>
_____	_____
_____	_____

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.

Date: 6-27-02

Ruggieri Family Real Estate LLC
Exact Name of Limited Liability Company

FILED

JUN 28 2002

By 2655

By Charles E Casale, Esq
Agent
Title