



2005

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

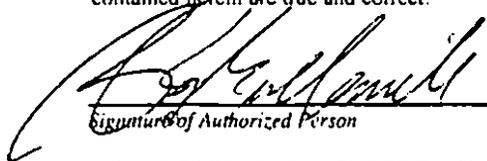
1. ID No. 142007		2. Exact name of the limited liability company Guill-Pike Realty, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REal Estate transactions, etc.			
5. Principal office address 20 Pike Street		City West Warwick	State RI	Zip 02893	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name A. Roger Guillemette			Contact Title Manager		
Street Address 20 Pike Street		City West Warwick	State RI	Zip 02893	
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 A. ROGER GUILLEMETTE			Manager Name		
Street Address Same as above			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	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 G. JOHN GAZERRO, JR. ESQ.			Address		
Address 1551 CENTREVILLE ROAD			City WARWICK	Zip 02886	

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



File Date	9/19/05	*142007*
Check No.	4070	
By:	A	
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: Sept 12/2005
A. ROGER GUILLEMETTE, Manager
Print or Type Name of Authorized Person