



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

| | | | | | |
|---|--|---|----------------------|-------------|---------------------|
| 1. Corporate ID No. 46107 | | 2. Name of Corporation Exchange Street Associates, Corp. | | | |
| 3. Street Address Principal Business Office 5 ENERGY WAY | | | City WEST WARWICK | State RI | Zip 02893 |
| 4. Business Phone No. 4018235200 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 5538 |

7. Brief Description of the Character of Business Conducted in Rhode Island
RENTAL REAL ESTATE

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | | | | | |
|-------------------------------------|-------------|--------------|--|-------------|--------------|
| President Name James V. Murphy | | | Vice President Name Michael J. Murphy | | |
| Street Address 103 Woods Way | | | Street Address 50 Osprey Drive | | |
| City North Kingstown | State RI | Zip 02852 | City East Greenwich | State RI | Zip 02818 |
| Secretary Name Michael J. Murphy | | | Treasurer Name James V. Murphy | | |
| Street Address same as above | | | Street Address same as above | | |
| City | State | Zip | City | State | Zip |

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | | | | | |
|-----------------------|-------|-----|----------------|-------|-----|
| Director Name None | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| Director Name | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

| AUTHORIZED SHARES | | | ISSUED SHARES | | |
|-------------------|-------------------|-----------|------------------|----------------|--------------|
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 4,000 | COMM NO PAR VALUE | | 200 | voting/common | no par value |
| | | | 1,800 | non-voting/com | no par value |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



4 6 1 0 7

46107 DBC 01/31/05 09:58:30 AM

File Date 2-17-05

Check No. 2051

By: [Signature]

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] Date 2-14-05

Signature of Officer

Michael J. Murphy

Print or Type Name of Officer

Vice President

Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

| | | | | | |
|---|-------------------|---|---|----------------|---------------------|
| 1. Corporate ID No. 46107 | | 2. Name of Corporation Exchange Street Associates, Corp. | | | |
| 3. Street Address Principal Business Office 5 ENERGY WAY | | | City WEST WARWICK | State RI | Zip 02893 |
| 4. Business Phone No. 4018235200 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 5538 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island RENTAL REAL ESTATE | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name James V. Murphy | | | Vice President Name Michael J. Murphy | | |
| Street Address 103 Woods Way | | | Street Address 50 Osprey Drive | | |
| City North Kingstown | State RI | Zip 02852 | City East Greenwich | State RI | Zip 02818 |
| Secretary Name Michael J. Murphy | | | Treasurer Name James V. Murphy | | |
| Street Address same as above | | | Street Address same as above | | |
| City | State | Zip | City | State | Zip |
| | | | | | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name None | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| | | | | | |
| Director Name | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| | | | | | |
| 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | |
| AUTHORIZED SHARES | | | ISSUED SHARES | | |
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 4,000 | COMM NO PAR VALUE | | 200 | voting/common | no par value |
| | | | 1,800 | non-voting/com | no par value |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



4 6 1 0 7

*46107 DBC
FILED
FEB 23 2004
11:48:53 AM*
File Date
Check No. BY [Signature] a 2/10/04
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]
Signature of Officer
Date 2-19-04
Michael J. Murphy
Print or Type Name of Officer
Vice-President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

| | | | | | |
|---|-------------------|---|---|----------------|---------------------|
| 1. Corporate ID No. *46107* | | 2. Name of Corporation Exchange Street Associates, Corp. | | | |
| 3. Street Address Principal Business Office 5 ENERGY WAY | | | City WEST WARWICK | State RI | Zip 02893 |
| 4. Business Phone No. 4018235200 | | 5. State of Incorporation RHODE ISLAND | | | 6. SIC Code 5538 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island RENTAL REAL ESTATE | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name James V. Murphy | | | Vice President Name Michael J. Murphy | | |
| Street Address 103 WOODS WAY | | | Street Address 50 Osprey Drive | | |
| City N. KINGSTOWN | State RI | Zip 02852 | City East Greenwich | State RI | Zip 02818 |
| Secretary Name Michael J. Murphy | | | Treasurer Name James V. Murphy | | |
| Street Address same | | | Street Address same | | |
| City | State | Zip | City | State | Zip |
| | | | | | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name None | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| | | | | | |
| Director Name | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| | | | | | |
| 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | |
| AUTHORIZED SHARES | | | ISSUED SHARES | | |
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 4,000 | COMM NO PAR VALUE | | 200 | voting common | no par value |
| | | | 1,800 | non-voting com | no par value |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



46107 DBC1/13/0312:53:51 PM

File Date 2.01.03

Check No. 1522

By: MP

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] 1-10-03
Signature of Officer Date

Michael J. Murphy
Print or Type Name of Officer

Vice President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **46107**
2. Name of Corporation **Exchange Street Associates, Corp.**
3. Street Address Principal Business Office
5 Energy Way
4. Business Phone No. **(401) 823-5200**
5. State of Incorporation **RHODE ISLAND**

City **West Warwick** State **RI** Zip **02893**
6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
Rental real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **James V. Murphy**
Street Address **28 Ladderlook Road**
City **Warwick** State **RI** Zip **02886**

Vice President Name **Michael J. Murphy**
Street Address **50 Osprey Drive**
City **East Greenwich** State **RI** Zip **02818**

Secretary Name **Michael J. Murphy**
Street Address **same as above**
City _____ State _____ Zip _____

Treasurer Name **James V. Murphy**
Street Address **same as above**
City _____ State _____ Zip _____

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **None**
Street Address _____
City _____ State _____ Zip _____

Director Name _____
Street Address _____
City _____ State _____ Zip _____

Director Name _____
Street Address _____
City _____ State _____ Zip _____

Director Name _____
Street Address _____
City _____ State _____ Zip _____

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
4,000 COMM NO PAR VALUE *
***2,000 Voting Common, 2,000 Non-Voting Common;**

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
200 Voting Common No Par
1,800 Non-Voting Common No Par

RECEIVED
SECRETARY OF STATE
FEB 15 12 20 PM '02

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 4 6 1 0 7 *

FILED

File Date: **FEB 15 2002**
Check No.: **BY [Signature]**
By: _____

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] **2-14-02**
Signature of Officer Date
Michael J. Murphy
Print or Type Name of Officer
Vice President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **46107** 2. Name of Corporation **Exchange Street Associates, Corp.**

3. Street Address Principal Business Office **5 Energy Way** City **West Warwick** State **RI** Zip **02893**
4. Business Phone No. **(401) 823-5200** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
Rental real estate.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|---|--|
| President Name James V. Murphy | Vice President Name Michael J. Murphy |
| Street Address 28 Ladderlook Road | Street Address 50 Osprey Drive |
| City State Zip Warwick RI 02886 | City State Zip East Greenwich RI 02818 |
| Treasurer Name James V. Murphy | |
| Street Address same as above | Street Address same as above |
| City State Zip | City State Zip |

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|------------------------------|----------------|
| Director Name None | Director Name |
| Street Address | Street Address |
| City State Zip | City State Zip |
| Director Name | Director Name |
| Street Address | Street Address |
| City State Zip | City State Zip |

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

| Number of Shares | Class/Series | Par Value |
|--|--------------|-----------|
| 4,000 COMMON NO PAR VALUE* | | |
| *2,000 Voting Common, 2,000 Non-Voting Common | | |

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

| Number of Shares | Class/Series | Par Value |
|------------------|--------------------------|---------------|
| 200 | Voting Common | No Par |
| 1,800 | Non-Voting Common | No Par |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 4 6 1 0 7 *

File Date: 2/5/2001
Check No.: 745
By: [Signature]

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] 2-2-01
Signature of Officer Date
Michael J. Murphy
Print or Type Name of Officer
Vice President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **46107** 2. Name of Corporation **Exchange Street Associates, Corp.**
3. Street Address Principal Business Office City State Zip
5 Energy Way West Warwick R I 02893
4. Business Phone No. (401) 823-5200 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
Rental real estate.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|---|---|
| President Name James V. Murphy | Vice President Name Michael J. Murphy |
| Street Address 28 Ladderlook Road | Street Address 50 Osprey Drive |
| City State Zip Warwick R I 02886 | City State Zip East Greenwich R I 02818 |
| Secretary Name Michael J. Murphy | Treasurer Name James V. Murphy |
| Street Address same as above | Street Address same as above |
| City State Zip | City State Zip |

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|------------------------------|----------------|
| Director Name None | Director Name |
| Street Address | Street Address |
| City State Zip | City State Zip |
| Director Name | Director Name |
| Street Address | Street Address |
| City State Zip | City State Zip |

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
4,000 COMMON NO PAR VALUE *
***2,000 Voting Common, 2,000 Non-Voting Common**

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
200 Voting common No par
1,800 Non-voting common No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 4 6 1 0 7 *

File Date: 2/17/00
Check No.: 5574
By: [Signature]

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 Officer: [Signature] Date: 2-16-00
Michael J. Murphy
Print or Type Name of Officer
Vice President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

| | | | |
|---|--------------------|--|----------------------------|
| 1. Corporate ID No. 46107 | | 2. Name of Corporation Exchange Street Associates, Corp. | |
| 3. Street Address Principal Business Office 5 Energy Way | | City West Warwick | State RI |
| 4. Business Phone No. (401) 823-5200 | | Zip 02893 | 6. SIC Code 5538 |
| 5. State of Incorporation RHODE ISLAND | | | |
| 7. Brief Description of the Character of Business Conducted in Rhode Island Rental real estate. | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| President Name James V. Murphy | | Vice President Name Michael J. Murphy | |
| Street Address 28 Ladderlook Road | | Street Address 50 Osprey Drive | |
| City Warwick | State RI | City East Greenwich | State RI |
| Zip 02886 | | Zip 02818 | |
| Secretary Name Michael J. Murphy | | Treasurer Name James V. Murphy | |
| Street Address same as above | | Street Address same as above | |
| City | State | City | State |
| Zip | | Zip | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| Director Name None | | Director Name | |
| Street Address | | Street Address | |
| City | State | City | State |
| Zip | | Zip | |
| Director Name | | Director Name | |
| Street Address | | Street Address | |
| City | State | City | State |
| Zip | | Zip | |
| 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) | | 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) | |
| AUTHORIZED SHARES | | ISSUED SHARES | |
| Number of Shares | Class/Series | Number of Shares | Class/Series |
| 4,000 COMMON NO PAR VALUE * | | 200 | Voting common |
| *2,000 Voting Common, 2,000 Non-Voting Common | | 1,800 | Non-voting common |
| Par Value | | Par Value | |
| | | No par | No par |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 4 6 1 0 7 *

File Date: Jan 19, 99
 Check No.: 5244
 By: [Signature]
 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 Officer: [Signature] Date: 1-5-99
 Michael J. Murphy
 Print or Type Name of Officer
 Vice President
 Title of Officer

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **46107** 2. Name of Corporation **Exchange Street Associates, Corp.**
3. Street Address Principal Business Office **5 Energy Way** City **West Warwick** State **RI** Zip **02893**
4. Business Phone No. **(401) 823-5200** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
Rental real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

| | |
|---|--|
| President Name James V. Murphy Street Address 28 Ladderlook Road City Warwick State RI Zip 02886 | Vice President Name Michael J. Murphy Street Address 50 Osprey Dr. 112-Grandview-Drive City East Greenwich State RI Zip 02818 |
| Secretary Name Michael J. Murphy Street Address same as above City _____ State _____ Zip _____ | Treasurer Name James V. Murphy Street Address same as above City _____ State _____ Zip _____ |

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

| | |
|--|---|
| Director Name NONE Street Address _____ City _____ State _____ Zip _____ | Director Name _____ Street Address _____ City _____ State _____ Zip _____ |
| Director Name _____ Street Address _____ City _____ State _____ Zip _____ | Director Name _____ Street Address _____ City _____ State _____ Zip _____ |

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value

4,000 COMMON NO PAR VALUE *

*2,000 Voting Common, 2,000 Non-Voting Common

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
200 Voting Common No Par
1,800 Non-Voting Common No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 3/2
Check No.: 4807
By: kw

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 Officer: [Signature] Date: 2-26-98
James V. Murphy Michael J. Murphy
Print or Type Name of Officer
President Vice President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT 1997
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **46107** 2. Name of Corporation **Exchange Street Associates, Corp.**
3. Street Address Principal Business Office **5 Energy Way** City **West Warwick** State **RI** Zip **02893**
4. Business Phone No. **(401) 823-5200** 5. State of Incorporation **Rhode Island** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island

Rental real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

| | | | | | |
|---------------------------|-----------|--------------|----------------------------|-----------|--------------|
| President Name | | | Vice President Name | | |
| James V. Murphy | | | Michael J. Murphy | | |
| Street Address | | | Street Address | | |
| 28 Ladderlook Road | | | 112 Grandview Drive | | |
| City | State | Zip | City | State | Zip |
| Warwick | RI | 02886 | East Greenwich | RI | 02818 |
| Secretary Name | | | Treasurer Name | | |
| Michael J. Murphy | | | James V. Murphy | | |
| Street Address | | | Street Address | | |
| same as above | | | same as above | | |
| City | State | Zip | City | State | Zip |

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

| | | | | | |
|----------------|-------|-----|----------------|-------|-----|
| Director Name | | | Director Name | | |
| NONE | | | | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| | | | | | |
| Director Name | | | Director Name | | |
| | | | | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

| AUTHORIZED SHARES | | | ISSUED SHARES | | |
|-------------------|-------------------|-----------|------------------|-------------------|-----------|
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 2000 | Voting Common | No Par | 200 | Voting Common | No Par |
| 2000 | Non-Voting Common | No Par | 1,800 | Non-Voting Common | No Par |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date: 2/12/97
Check No.: 4398
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

Signature of Officer: [Signature] Date: 2/6/97
Print or Type Name of Officer: James V. Murphy
Title of Officer: President

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

| | | | | | |
|--|-------------------|---|--|---------------------|-------------------|
| 1. CORPORATE ID NO. 46107 | | 2. NAME OF CORPORATION Exchange Street Associates, Corp. | | | |
| 3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 5 Energy Way | | | CITY West Warwick | STATE RI | ZIP CODE 02893 |
| 4. BUSINESS PHONE NO. (401) 823-5200 | | 5. STATE OF INCORPORATION RHODE ISLAND | | 6. SIC CODE 5538 | |
| 7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Rental real estate. | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS | | | | | |
| PRESIDENT NAME James V. Murphy | | | VICE PRESIDENT NAME Michael J. Murphy | | |
| STREET ADDRESS 28 Laderlook Road | | | STREET ADDRESS 112 Grandview Drive | | |
| CITY Warwick | STATE RI | ZIP CODE 02886 | CITY East Greenwich | STATE RI | ZIP CODE 02818 |
| SECRETARY NAME Michael J. Murphy | | | TREASURER NAME James V. Murphy | | |
| STREET ADDRESS 112 Grandview Drive | | | STREET ADDRESS same as above | | |
| CITY East Greenwich | STATE RI | ZIP CODE 02818 | CITY | STATE | ZIP CODE |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS | | | | | |
| DIRECTOR NAME NONE | | | DIRECTOR NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY | STATE | ZIP CODE | CITY | STATE | ZIP CODE |
| DIRECTOR NAME | | | DIRECTOR NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY | STATE | ZIP CODE | CITY | STATE | ZIP CODE |
| 10. SHARES AUTHORIZED AND ISSUED | | | | | |
| AUTHORIZED SHARES | | | ISSUED SHARES | | |
| NUMBER OF SHARES | CLASS / SERIES | PAR VALUE | NUMBER OF SHARES | CLASS / SERIES | PAR VALUE |
| 2000 | Voting Common | No Par | 200 | Voting Common | No Par |
| 2000 | Non-Voting Common | No Par | 1,800 | Non-Voting Common | No Par |

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date: 2/7/96
Check No: 3841
By: K/D/yp
For Secretary of State Use Only

Signature of Officer
James V. Murphy
Print or Type Name of Officer
President
Title of Officer
Date: 2/7/96

Name of Business Entity: EXCHANGE STREET ASSOCIATES, CORP.

Business entity organized under the laws of the State of Rhode Island

Federal Taxpayer Identification Number: [REDACTED]

Foreign entity, address and telephone number of principal office:

N/A

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box)

5 Energy Way
West Warwick, RI 02893

Telephone (401) 823-5200

Business Entity is (check one):

- Business Corporation (See RIGL Chapter 7-1.1)
- Professional Service Corporation (See RIGL Chapter 7-5.1)
- Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

James V. Murphy, President
5 Energy Way
West Warwick, RI 02893

Brief statement of the character of business conducted in Rhode Island
rental real estate.

Date of Organization: January 1988 2/4/88

Date of Qualification to do business in Rhode Island (if foreign entity)
N/A

THE NAMES OF THE OFFICERS ARE:

| OFFICER | STREET ADDRESS | CITY/STATE | ZIP CODE |
|--|--|------------|----------|
| Chief Executive Officer OR <input checked="" type="checkbox"/> PRESIDENT (Check One) James V. Murphy | 28 Ladderlook Road, Warwick, RI | | |
| Chief Operating Officer OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One) Michael J. Murphy | 112 Grandview Drive, Ea. Greenwich, RI 02818 | | |
| Secretary OR <input checked="" type="checkbox"/> SECRETARY (Check One) Michael J. Murphy | same as above | | |
| Chief Financial Officer OR <input checked="" type="checkbox"/> TREASURER (Check One) James V. Murphy | same as above | | |

THE NAMES OF THE DIRECTORS ARE:

| NAME | STREET ADDRESS | CITY/STATE | ZIP CODE |
|------|----------------|------------|----------|
| NONE | | | |

NUMBER OF SHARES AUTHORIZED (If Applicable)

| CLASS | NUMBER |
|--------------------------|--------------------------|
| (a) 2,000 | |
| (b) 2,000 | |
| (a) Voting Common | |
| (b) Non Voting Common | |
| SERIES | -- |
| PAR VALUE OR WITHOUT PAR | (a) No Par (b) No Par |

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

| CLASS | NUMBER |
|--------------------------|--------------------------|
| (a) 200 | |
| (b) 1,800 | |
| (a) Voting Common | |
| (b) Non Voting Common | |
| SERIES | -- |
| PAR VALUE OR WITHOUT PAR | (a) No Par (b) No Par |

February 22, 1994

By: James V. Murphy
James V. Murphy
President

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

FILED
FEB 24 1994
DIME 59 3120

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

2686 9/3
State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0045107..... Annual Report for the year.....1993.....

FIRST: The name of the corporation is.....Exchange Street Associates, Corp.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....Real Estate Rental.....

FOURTH: If foreign corporation, address of its principal office.....N/A.....

FIFTH: Business address in Rhode Island.....5 Division Street.....
Warwick, Rhode Island 02818.....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|-------------------|----------------|--|
| | Director | |
| | Director | |
| | Director | |
| James V. Murphy | President | 28 Ladderlock Rd., Warwick, RI 02818 |
| Michael J. Murphy | Vice President | 112 Grandview Dr., East Greenwich, RI |
| Michael J. Murphy | Secretary | 112 Grandview Dr., East Greenwich, RI |
| James V. Murphy | Treasurer | 28 Ladderlock Rd., Warwick, RI 02818 |

SEVENTH: Number of Shares authorized:

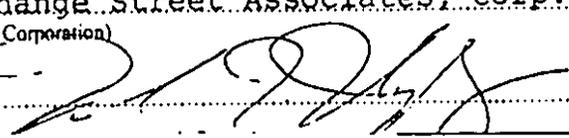
| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 2,000 | Common | | No Par |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 2,000 | Common | | No Par |

Dated.....January 25,..... 19 93.

Exchange Street Associates, Corp.
(Name of Corporation)

By..........

PAID

FEB 16 1993

SECY OF STATE

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 46107

Annual Report for the year 1992

FIRST: The name of the corporation is EXCHANGE STREET ASSOCIATES, CORP.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rental real estate.

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island
5 Energy Way, West Warwick, RI 02893

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|--------------------------|-----------------------|---|
| <u>NONE</u> | <u>Director</u> | |
| | <u>Director</u> | |
| | <u>Director</u> | |
| <u>James V. Murphy</u> | <u>President</u> | <u>28 Ladderlock Road, Warwick, RI</u> |
| <u>Michael J. Murphy</u> | <u>Vice President</u> | <u>112 Grandview Dr., Ea. Greenwich, RI 02818</u> |
| <u>Michael J. Murphy</u> | <u>Secretary</u> | <u>same as above</u> |
| <u>James V. Murphy</u> | <u>Treasurer</u> | <u>same as above</u> |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------------------------|-----------|--|
| <u>2,000</u> | <u>Voting Common</u> | <u>--</u> | <u>No Par</u> |
| <u>2,000</u> | <u>Non Voting Common</u> | <u>--</u> | <u>No Par</u> |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------------------------|-----------|--|
| <u>200</u> | <u>Voting Common</u> | <u>--</u> | <u>No Par</u> |
| <u>1,800</u> | <u>Non Voting Common</u> | <u>--</u> | <u>No Par</u> |

Dated February 7 19 92

EXCHANGE STREET ASSOCIATES, CORP.
(Name of Corporation)

By [Signature]
Title President

(Report must be signed by an officer)

PAID
FEB 10 1992
SECY OF STATE
DH 32
CK 3434

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903



Corporate ID 0046107

Annual Report for the year 1991

FIRST: The name of the corporation is Exchange Street Associates, Corp.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Rental Property

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 5 Division St. Warwick, RI 02818

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|-------------------|----------------|--|
| | Director | |
| | Director | |
| | Director | |
| James V. Murphy | President | 5 Energy Way W. Warwick, RI 02893 |
| Michael J. Murphy | Vice President | 5 Energy Way W. Warwick, RI 02893 |
| | Secretary | |
| | Treasurer | |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|-------|--------|--|
| 2,000 | A | | No Par |

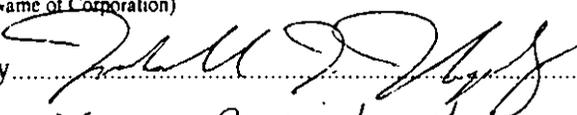
EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|-------|--------|--|
| 200 | A | | No Par |

PAID
JAN 18 1991
REC'D OF STATE

Dated January 10, 19 91

EXCHANGE STREET ASSOCIATES, CORP.

(Name of Corporation)
By 
Title Vice President

(Report must be signed by an officer)



ANNUAL REPORT

Please Type or Print
 File Annually - Jan. 1 - March 1
 Filing Fee \$50.00
 Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 46107 Annual Report for the year: 1995

Name of Corporation: EXCHANGE STREET ASSOCIATES, CORP.

Business entity organized under the laws of the State of: Rhode Island Business Entity is (check one):

For foreign entity, address and telephone number of principal office: N/A
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: () Brief statement of the character of business conducted in Rhode Island:
Rental real estate.

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

5 Energy Way
West Warwick, RI 02893

Phone: (401) 823-5200

THE NAMES OF THE OFFICERS ARE:

PRESIDENT STREET ADDRESS CITY/STATE ZIP CODE

James V. Murphy 28 Ladderlook Road, Warwick, RI

VICE PRESIDENT STREET ADDRESS CITY/STATE ZIP CODE

Michael J. Murphy 112 Grandview Drive, Ea. Greenwich, RI 02818

SECRETARY STREET ADDRESS CITY/STATE ZIP CODE

Michael J. Murphy same as above

TREASURER STREET ADDRESS CITY/STATE ZIP CODE

James V. Murphy same as above

THE NAMES OF THE DIRECTORS ARE:

NAME STREET ADDRESS CITY/STATE ZIP CODE

NONE

NAME STREET ADDRESS CITY/STATE ZIP CODE

NAME STREET ADDRESS CITY/STATE ZIP CODE

| NUMBER OF SHARES AUTHORIZED (Rider may be attached) | | NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) | |
|---|--------------------------|---|--------------------------|
| Number of Shares | Class / Series | Number of Shares | Class / Series |
| (a) 2,000 | Voting Common No Par | (a) 200 | Voting Common No Par |
| (b) 2,000 | Non-Voting Common No Par | (b) 1,800 | Non-Voting Common No Par |

Date January 18, 19 95 By: James V. Murphy

Form 31 1-95 PRINT OR TYPE NAME OF OFFICE SIGNING Chairman of the Board TITLE OF OFFICER SIGNING President

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

CZ

Corporate ID 0045107 Annual Report for the year 1990

FIRST: The name of the corporation is Exchange Street Associates, Corp.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is SALE, PURCHASE, RENTAL OF REAL ESTATE

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 5 DIVISION STREET, WARWICK, RI 02818

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|-------------------|----------------|--|
| | Director | |
| | Director | |
| | Director | |
| JAMES V. MURPHY | President | 28 LADDERLOOK ROAD, WARWICK, RI 02888 |
| MICHAEL J. MURPHY | Vice President | 112 GRANDVIEW DRIVE, E. GREENWICH 02818 |
| MICHAEL J. MURPHY | Secretary | 112 GRANDVIEW DRIVE, E. GREENWICH 02818 |
| JAMES V. MURPHY | Treasurer | 28 LADDERLOOK ROAD, WARWICK, RI 02888 |

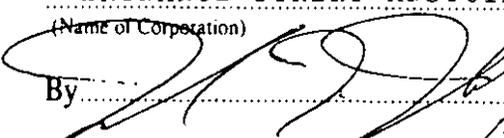
SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 2000 | COMMON | | NO PAR |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 200 | COMMON | | NO PAR |

Dated JANUARY 18 19 90

PAID
 EXCHANGE STREET ASSOCIATES CORP.
 (Name of Corporation)
 By 
 Title VICE PRESIDENT
 JAN 24 1990
 SECY OF STATE

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903



Corporate ID 46107 Annual Report for the year 1989

FIRST: The name of the corporation is EXCHANGE STREET ASSOCIATES, CORP.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rental real estate.

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 5 Energy Way, West Warwick, RI 02893

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

| Name | Office | Address (including number, street, zip code) |
|-------------------|----------------|--|
| NONE | Director | |
| | Director | |
| | Director | |
| James V. Murphy | President | 5 Energy Way, West Warwick, RI 02893 |
| Michael J. Murphy | Vice President | same as above |
| Michael J. Murphy | Secretary | same as above |
| James V. Murphy | Treasurer | same as above |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|---------|--|
| 2,000 | Common | PAID -- | No Par |

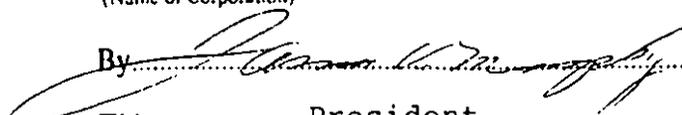
FEB 10 1989

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 200 | Common | -- | No Par |

SECY OF STATE

Dated 1-28-19 89 EXCHANGE STREET ASSOCIATES, CORP.
(Name of Corporation)

By 
Title President

(Report must be signed by an officer)