



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 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 107107		2. Exact name of the limited liability company Mutual Properties Apple Valley L L C	
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 One James P Murphy Highway		City West Warwick	State RI
		Zip 02893	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Stephen G Soscia		Contact Title Managing Member	
Street Address One James P Murphy Highway		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 Stephen G Soscia		Manager Name	
Street Address One James P Murphy Highway		Street Address	
City West Warwick	State RI	City	State
Zip 02893		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 STEPHEN G. SOSCIA		Address	
Address ONE JAMES P. MURPHY HIGHWAY		City WEST WARWICK	Zip 02893

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



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 9/30/05 *107107*
Check No. 7455
By: CP

FOR SECRETARY OF STATE USE ONLY

Signature of Authorized Person
Stephen G SosciaDate
9/29/05

Stephen G Soscia Managing Member

Print or Type Name of Authorized Person



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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. 107107		2. Exact name of the limited liability company Mutual Properties Apple Valley L L C			
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 One James P Murphy Highway		City West Warwick		State RI	Zip 02893
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Stephen G Soscia			Contact Title Managing Member		
Street Address One James P Murphy Highway		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 Stephen G Soscia			Manager Name		
Street Address One James P Murphy Highway			Street Address		
City West Warwick	State RI	Zip 02893	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 STEPHEN G. SOSCIA			Address		
Address ONE JAMES P. MURPHY HIGHWAY			City WEST WARWICK	Zip 02893	

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



* 1 0 7 1 0 7 *

File Date 10/31/03
Check No. 9297
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.

Stephen G Soscia Managing Member 10/27/03
Signature of Authorized Person Date

Stephen G Soscia
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
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLLC 107107

Annual Report for the year 2001

1. The name of the limited liability company is:

Mutual Properties Apple Valley L L C

2. The address of the principal office of the limited liability company is:

One James P Murphy Highway, West Warwick, R. I. 02893

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: STEPHEN G. SOSCIA

ONE JAMES P. MURPHY HIGHWAY WEST WARWICK RI 02893

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Stephen G. Soccia

One James P Murphy Highway, West Warwick, R. I. 02893

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Real Estate

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Stephen G. Soccia

One James P Murphy Highway, West Warwick, RI

Dated October 18, 2001



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.

Mutual Properties Apple Valley LLC

Exact Name of Limited Liability Company

FOR SECRETARY OF STATE USE ONLY
File Date: 10-23-01

Check No.: 7127

By: Re

By: Stephen G. Soccia Managing Member

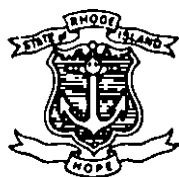
Managing Member

Title

Form No. 632
Revised 01/99

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



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Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLLC 107107

Annual Report for the year 2000

1. The name of the limited liability company is:

Mutual Properties Apple Valley L L C

2. The address of the principal office of the limited liability company is:

One James P Murphy Highway, West Warwick, RI 02893

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: STEPHEN G. SOSCIA

ONE JAMES P. MURPHY HIGHWAY WEST WARWICK RI 02893

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Stephen G Soscia

One James P Murphy Highway, West Warwick, RI 02893

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Real Estate

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

<i>Name</i>	<i>Address</i>
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Stephen G Soscia

One James P Murphy Highway, West Warwick, RI 02893

Dated 10/3/00



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.

Mutual Properties Apple Valley L L C
Exact Name of Limited Liability Company

By Stephen G Soscia

Managing Member

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 10/4

Check No.: 7029

By: du

Form No. 632
Revised 01/99