



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. 72208		2. Exact name of the limited liability company Hunt Club, 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 1140 RESERVOIR AVENUE		City CRANSTON	State RI
		Zip 02920	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name JAMES PROCACCIANTI		Contact Title .	
Street Address 1140 RESERVOIR AVENUE		City CRANSTON	State RI
		Zip 02920	
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 JAMES PROCACCIANTI		*Manager Name .	
Street Address 1140 RESERVOIR AVENUE		*Street Address .	
City CRANSTON	State RI	Zip 02920	*City .
*State .		*Zip .	
*Manager Name .		*Street Address .	
Street Address .		*Street Address .	
City .	State .	Zip .	*City .
*State .		*Zip .	
*Manager Name .		*Street Address .	
8. RESIDENT AGENT IN RHODE ISLAND. DO NOT ALTER. Changes require filing of Form 642 - R.I.G.L. 7-16-11.			
Agent Name JAMES P. REDDING, ESQ.		Address 1500 FLEET CENTER	
Address .		City PROVIDENCE	Zip 02903

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



7 2 2 0 8

72208 DLLC 10/17/05 01:32:34 PM

File Date 11/8/05

Check No. 172835 A81714

By: KML

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.

James Procaccianti 11/1/05
Signature of Authorized Person Date
James Procaccianti, Mgr
Print or type Name of Authorized Person



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. 72208		2. Exact name of the limited liability company Hunt Club, 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 1140 RESERVOIR AVENUE		City CRANSTON	State RI
		Zip 02920	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name JAMES PROCACCIANTI		Contact Title	
Street Address 1140 RESERVOIR AVE.		City CRANSTON	State RI
		Zip 02920-	
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 James Procaccianti		*Manager Name	
Street Address 1140 Reservoir Avenue		*Street Address	
City Cranston	State RI	Zip 02920	*City State Zip
*Manager Name		*Street Address	
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 JAMES P. REDDING, ESQ.		Address 1500 FLEET CENTER	
Address		City PROVIDENCE	Zip 02903

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



7 2 2 0 8

72208 DLLC 09/21/04 09:22:46 AM

File Date 11/8/04

Check No. 164242

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 Authorized Person [Signature] Date _____
James P. Redding
Print or type Name of Authorized Person



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. 72208		2. Exact name of the limited liability company Hunt Club, 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 1140 RESERVOIR AVENUE		City CRANSTON	State RI
		Zip 02920	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name JAMES PROCACCIANTI		Contact Title	
Street Address 1140 RESERVOIR AVE		City CRANSTON	State RI
		Zip 02920	
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 James Procaccianti		Manager Name	
Street Address 1140 Reservoir Avenue		Street Address	
City Cranston	State RI	Zip 02920	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 JAMES P. REDDING, ESQ.		Address 1500 FLEET CENTER	
Address		City PROVIDENCE	Zip 02903

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



7 2 2 0 8

72208 DLLC 10/15/03 11:46:06 AM	
File Date	12-11-03
Check No.	157233
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

Date

James P. Redding

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. *72208*		2. Exact name of the limited liability company Hunt Club, 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 1140 RESERVOIR AVENUE		City CRANSTON	State RI	Zip 02920	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name MANAGER			Contact Title		
Street Address 1140 RESERVOIR AVE.		City CRANSTON	State RI	Zip 02920	
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 James Procaccianti		Manager Name			
Street Address 1140 Reservoir Avenue		Street Address			
City Cranston	State RI	Zip 02920	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 JAMES P. REDDING, ESQ.		Address 1500 FLEET CENTER			
Address		City PROVIDENCE		Zip 02903	

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



* 7 2 2 0 8 *

72208 DLLC10/200208 PM	FILED
File Date	NOV 07 2002
Check No.	By C. 147098
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: James P. Redding Date: 11/1/02
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 72208

Annual Report for the year 2001

1. The name of the limited liability company is:

Hunt Club, LLC

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

1140 Reservoir Avenue, Cranston, RI 02920

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: JAMES P. REDDING, ESQ.

1500 FLEET CENTER PROVIDENCE RI 02903

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: Managing Member

1140 Reservoir Avenue, Cranston, RI 02920

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

Name

Address

Dated 10-15-01

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.

Hunt Club, LLC

Exact Name of Limited Liability Company

By [Signature]
Resident Agent

Title



FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>FILED</u>
Check No.:	<u>JAN 24 2002</u>
By:	<u>By CC1033</u> <u>[Signature]</u>

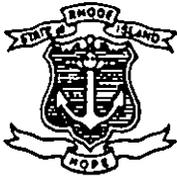
Form No. 632
Revised 01/99

DETACH BOTTOM BEFORE RETURNING

Please detach and mail the above section including payment in the amount of \$50.00 made payable to Secretary of State. If the registered office and/or registered agent indicated below has changed, Form 642 must be filed in this office. Forms may be obtained by contacting this office at (401) 222-3040 or from a public site at www.state.ri.us

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 72208

Annual Report for the year 2000

1. The name of the limited liability company is:

Hunt Club, LLC

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

1140 Reservoir Avenue, Cranston, RI 02920

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: James P. Redding, Esq.

1500 Fleet Center, Providence, RI 02903

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: Managing member

1140 Reservoir Avenue, Cranston, RI 02920

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

Name

Address

Dated _____



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.

Hunt Club, LLC

Exact Name of Limited Liability Company

By _____

Resident Agent

Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	FILED
Check No:	DEC 18 2000
By:	<u>James P. Redding</u>

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 0072208

Annual Report for the year 1999

1. The name of the limited liability company is: **Kuehn Road Associates, L.L.C.**
2. The address of the principal office of the limited liability company is:

1140 Reservoir Avenue
Cranston, RI 02920
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: **Sandra Matrone Mack as Secretary HASLAW, LLC
1500 Fleet Center, Providence, RI 02903**
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: **Managing Member, 1140 Reservoir Avenue,
Cranston, RI 02920**
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

Name

Address

Dated _____

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.

Kuehn Road Associates, L.L.C.

Exact Name of Limited Liability Company

By: _____

Authorized Person

Title

PAID

NOV 26 1999

SECY OF STATE

1020

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 0072208

Annual Report for the year 1998

1. The name of the limited liability company is: Kuehn Road Associates, L.L.C.
2. The address of the principal office of the limited liability company is:

1140 Reservoir Avenue
Cranston, RI 02920
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: James P. Redding, Esq., 170 Westminster Street,
Suite 1000, Providence, RI 02903
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: Managing Member, 1140 Reservoir Avenue,
Cranston, RI 02920
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

Name

Address

Dated _____

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.

AMF
1008

11-2-98

Kuehn Road Associates, L.L.C.
Exact Name of Limited Liability Company

By: _____

Authorized Person

Title

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 0072208

Annual Report for the year 1997

1. The name of the limited liability company is:

Kuehn Road Associates, L.L.C.

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

1140 Reservoir Avenue, Cranston, RI 02920

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: James P. Redding, Esq.

170 Westminster St., Suite 1000, Providence, RI 02903

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: Manager

1140 Reservoir Avenue, Cranston, RI 02920

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

Name

Address

Dated 10/31, 1997

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.

Kuehn Road Associates, L.L.C.

PAID

OCT 31 1997

SECY OF STATE

Exact Name of Limited Liability Company

By _____

Manager

Title

JMD @192312

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
Corporation Division
100 North Main Street
Providence, RI 02903-1335

LIMITED LIABILITY COMPANY

LLC I.D.# 72208

Annual Report for the year 1996

FIRST: The name of the limited liability company is: **Kuehn Road Associates, L.L.C.**

SECOND: The address of the principal office of the limited liability company is:

.....
1140 Reservoir Avenue, Cranston, RI 02920
.....

THIRD: The state or other jurisdiction under the laws of which it is formed is: **Rhode Island**

FOURTH: The name and address of its resident agent is:

.....
Francis D. Parisi, Esq.
.....
170 Westminster St., Suite 1000, Providence, RI 02903
.....

FIFTH: The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:

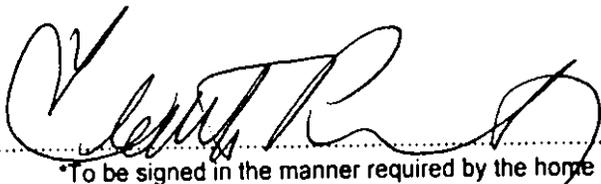
.....
Manager
.....
1140 Reservoir Avenue, Cranston, RI 02920
.....

SIXTH: A brief statement of the character of the business in which the corporation is actually engaged in this state:
Real estate
.....
.....

Dated 10/30, 19 96

.....
Kuehn Road Associates, L.L.C.
.....
Exact Name of Limited Liability Company

File Date:	<u>10/30/96</u>
Check No:	<u>1020</u>
By:	<u>cc</u>
For Secretary of State Use Only	

*By .....
*To be signed in the manner required by the home state.

Title Manager.....

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
Corporation Division
100 North Main Street
Providence, RI 02903-1335

LIMITED LIABILITY COMPANY

LLC I.D. # 0072208

Annual Report for the year 1995

FIRST: The name of the limited liability company is:

Kuehn Road Associates, L.L.C.

SECOND: The address of the principal office of the limited liability company is:

1140 Reservoir Avenue

Cranston, RI 02920

THIRD: The state or other jurisdiction under the laws of which it is formed is:

RI

FOURTH: The name and address of its resident agent is:

Francis D. Parisi, Esq.

170 Westminster Street, Suite 1000, Providence, RI 02903

FIFTH: The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:

Manager

1140 Reservoir Avenue, Cranston, RI 02920

SIXTH: A brief statement of the character of the business in which the corporation is actually engaged in this state:

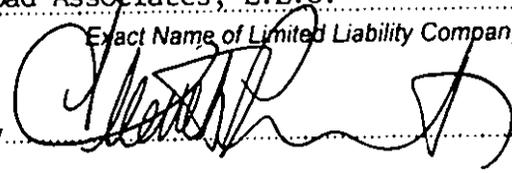
Real estate

Dated 11/1, 19 95

Kuehn Road Associates, L.L.C.

Exact Name of Limited Liability Company

*By



Title Manager

FILED

NOV 03 1995

By CA 1154

*To be signed in the manner required by the home state.

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC Sept. 1 - Nov. 1
CORP. Jan. 1 - March 1

Corporate ID: 0072208 Annual Report for the year 1994

Name of Business Entity: Kuehn Road Associates, L.L.C.

Business entity organized under the laws of the State of: RI

Federal Taxpayer Identification Number: _____

For foreign entity, address and telephone number of principal office:
N/A

Phone: () _____

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

1140 Reservoir Avenue
Cranston, RI 02920

Phone: (401) 946-4600

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:

Mark Bacon, Manager
1140 Reservoir Avenue
Cranston, RI 02920

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

Date of Organization: 09/21/1993

Date of Qualification to do business in Rhode Island (if foreign entity): _____

THE NAMES OF THE OFFICERS ARE:

CHIEF EXECUTIVE OFFICER OR PRESIDENT (Check One) STREET ADDRESS CITY/STATE ZIP CODE
N/A

CHIEF OPERATING OFFICER OR VICE PRESIDENT (Check One) STREET ADDRESS CITY/STATE ZIP CODE
N/A

CUSTODIAN OF RECORDS OR SECRETARY (Check One) STREET ADDRESS CITY/STATE ZIP CODE
N/A

CHIEF FINANCIAL OFFICER OR TREASURER (Check One) STREET ADDRESS CITY/STATE ZIP CODE
N/A

THE NAMES OF THE DIRECTORS ARE:

NAME STREET ADDRESS CITY/STATE ZIP CODE
N/A

NAME STREET ADDRESS CITY/STATE ZIP CODE
N/A

NAME STREET ADDRESS CITY/STATE ZIP CODE
N/A

NUMBER OF SHARES AUTHORIZED (if Applicable)		NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable)	
NUMBER	CLASS	NUMBER	CLASS
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

Date 1/17 19 94

By: Mark Bacon

FILED

JAN 10 1995

By: Francis D. Parisi

PRINT OR TYPE NAME OF OFFICER SIGNING
Mark Bacon

TITLE OF OFFICER SIGNING
Manager

Form 31 '94
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.

FRANCIS D. PARISI
170 WESTMINSTER STREET
PROVIDENCE RI 02903

STATUTORY REQUIREMENT: NO FEE

LLC I.D.#72208

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Corporations Division
100 North Main Street
Providence, Rhode Island 02903

Annual Report for the year: 1993 (STATUTORY REQUIREMENT: 1993
LLC'S)

FIRST: The name and address of the principal office of the
limited liability company is: **Kuehn Road Associates, L.L.C.**
1140 Reservoir Avenue
Cranston, RI 02920

SECOND: It is formed under the laws of: **Rhode Island**

THIRD: Name and address of its resident agent is:

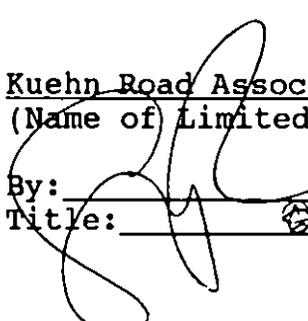
Francis D. Parisi, Esq.
James P. Redding & Associates
170 Westminster Street
Providence, RI 02903

FOURTH: The current mailing address of the limited liability
company and the name or title of a person to whom communications
may be directed are: **1140 Reservoir Avenue**
Cranston, RI 02920
Attn: Manager

FIFTH: A brief statement of the character of the business in
which the limited liability company is actually engaged in Rhode
Island: **real estate development**

Dated: April 22, 1993

Kuehn Road Associates, L.L.C.
(Name of Limited Liability Company)

By: 
Title: Authorized Person

Rec'd & Filed OCT 22 1993