



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. 100910		2. Exact name of the limited liability company MANSI COMMERCIAL PROPERTIES, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island RENTAL PROPERTY			
5. Principal office address 1 Long Lane		City WARREN	State R.I.	Zip 02885	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Frank M. Mansi		Contact Title PRES.			
Street Address 1 Long Lane		City WARREN	State R.I.	Zip 02885	
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		Manager Name			
Street Address		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 FRANK M. MANSI		Address			
Address ONE LONG LANE		City WARREN	Zip 02885		

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



File Date <u>11/21</u>	*100910*
Check No. <u>353</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.

Frank M. Mansi 11-7-05
Signature of Authorized Person Date
Frank M. Mansi
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. 100910		2. Exact name of the limited liability company MANSI COMMERCIAL PROPERTIES, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island RENTAL PROPERTY			
5. Principal office address 1 Long Lane		City WARREN	State R.I.	Zip 02885	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Frank M. Mansi			Contact Title PRES.		
Street Address 1 Long Lane		City WARREN	State R.I.	Zip 02885	
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			Manager Name		
Street Address			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 FRANK M. MANSI			Address		
Address ONE LONG LANE			City WARREN	Zip 02885	

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



* 1 0 0 9 1 0 *

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 11/1/04
Check No. 344
By: DA
FOR SECRETARY OF STATE USE ONLY

Frank M. Mansi 10-25-04
Signature of Authorized Person Date
Frank M. Mansi PRES.
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. 100910		2. Exact name of the limited liability company MANSI COMMERCIAL PROPERTIES, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island RENTAL PROPERTY			
5. Principal office address 1 Long Lane WARREN, R.I.		City WARREN	State R.I.	Zip 02885	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Frank M. Mansi			Contact Title Pres.		
Street Address 1 Long Lane		City WARREN	State R.I.	Zip 02885	
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			Manager Name		
Street Address			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 FRANK M. MANSI			Address		
Address ONE LONG LANE			City WARREN	Zip 02885	

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



* 1 0 0 9 1 0 *

File Date 11/28/03
Check No. 336
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.

Frank M. Mansi 10/27/03
Signature of Authorized Person Date
FRANK M MANSI
Print or Type Name of Authorized Person



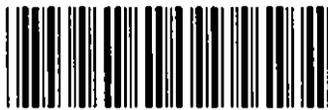
LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 100910		2. Exact name of the limited liability company MANSI COMMERCIAL PROPERTIES, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island RENTAL PROPERTY	
5. Principal office address (ONE) Long Lane		City WARREN	State R.I.
		Zip 02885	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Frank M. Mansi		Contact Title PRES.	
Street Address (ONE) Long Lane		City WARREN	State R.I.
		Zip 02885	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		* Manager Name	
Street Address		* 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 FRANK M. MANSI		Address	
Address ONE LONG LANE		City WARREN	Zip 02885

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



* 1 0 0 9 1 0 *

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	10.21.02
Check No.	328
By:	<i>[Signature]</i>
FOR SECRETARY OF STATE USE ONLY	

Frank M. Mansi 10-18-02
Signature of Authorized Person Date
Frank M. Mansi
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 100910

Annual Report for the year 2001

1. The name of the limited liability company is:

MANSI COMMERCIAL PROPERTIES, LLC

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

1 Long Lane, WARREN, R.I. 02885

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: FRANK M. MANSI

ONE LONG LANE WARREN RI 02885

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: Frank M. Mansi, 1 Long Lane

WARREN, R.I. 02885

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

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.



1 0 0 9 1 0

Mansi Commercial Properties, LLC
Exact Name of Limited Liability Company

By Frank M. Mansi
PRESIDENT
Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>10-24-01</u>
Check No.:	<u>319</u>
By:	<u>[Signature]</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
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLCC 100910

Annual Report for the year 2000

1. The name of the limited liability company is:

MANSI COMMERCIAL PROPERTIES, LLC

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

1 Long Lane

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: FRANK M. MANSI

ONE LONG LANE WARREN RI 02885

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: 1 Long Lane, Warren, R.I. 02885

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: FOR PURPOSE OF RENTAL PROPERTY

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

Name

Address

Dated Oct. 6, 2000



1 0 0 9 1 0

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.

Mansi Commercial Properties, LLC
Exact Name of Limited Liability Company

By Frank M. Mansi
PRES.
Title

FOR SECRETARY OF STATE USE ONLY
File Date: 10/10/00
Check No.: 176
AMF

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 LL 100910

Annual Report for the year 1999

1. The name of the limited liability company is:

MANSI COMMERCIAL PROPERTIES, LLC

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

1 Long Lane, Warren, R.I. 02885

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: FRANK M. MANSI

ONE LONG LANE WARREN, RI 02885

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:

1 Long Lane Warren, R.I.
Frank M. Mansi - Operating Manager

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Managing real estate + collecting rents

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

Name	Address
<u>Frank M. Mansi</u>	<u>1 Long Lane, Warren, R.I. 02885</u>
<u>Ethel L. Mansi</u>	<u>1 Long Lane, Warren, R.I. 02885</u>

Dated Oct. 7, 1999

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.



Mansi Commercial Properties, LLC
Exact Name of Limited Liability Company

By Frank M. Mansi
Operating Manager
Title

FOR SECRETARY OF STATE USE ONLY

File Date: 10-12-99

Check No.: 106

By: AMF

Form No. 632
Revised 01/99