



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No 103911		2. Name of Corporation Northeast Properties of New Hampshire, Inc.			
3. Street Address Principal Business Office 51 Jefferson Blvd.			City Warwick	State RI	Zip 02888
4. Business Phone No. 401-941-1400		5. State of Incorporation RHODE ISLAND			6. SIC Code 0
7. Brief Description of the Character of Business Conducted in Rhode Island TO HOLD AND INVEST IN NEW HAMPSHIRE REAL ESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Richard Zompa			Vice President Name David Iannuccilli		
Street Address 1875 Mineral Spring Avenue			Street Address 655 Main Street		
City N. Providence	State RI	Zip 02904	City E. Greenwich	State RI	Zip 02818
Secretary Name David Iannuccilli			Treasurer Name Richard Zompa		
Street Address 655 Main Street			Street Address 1875 Mineral Spring Avenue		
City East Greenwich	State RI	Zip 02818	City N. Providence	State RI	Zip 02904
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Richard Zompa			Director Name David Iannuccilli		
Street Address 1875 Mineral Spring Avenue			Street Address 655 Main Street		
City N. Providence	State RI	Zip 02904	City E. Greenwich	State RI	Zip 02818
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
1,000 NO PAR VALUE			1,000	common	none

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



File Date 1-25-05
Check No. 244
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] 1/13/05
Signature of Officer Date

Richard Zompa
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 103911		2. Name of Corporation Northeast Properties of New Hampshire, Inc.			
3. Street Address Principal Business Office 51 Jefferson Blvd			City Warwick	State RI	Zip 02888
4. Business Phone No. (401)941-1400		5. State of Incorporation RHODE ISLAND			6. SIC Code 0
7. Brief Description of the Character of Business Conducted in Rhode Island TO HOLD AND INVEST IN NEW HAMPSHIRE REAL ESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Richard Zompa			Vice President Name David Iannuccilli		
Street Address 1875 Mineral Spring Avenue			Street Address 655 Main Street		
City East Greenwich	State RI	Zip 02818	City North Providence	State RI	Zip 02904
Secretary Name David Iannuccilli			Treasurer Name Richard Zompa		
Street Address 655 Main Street			Street Address 1875 Mineral Spring Avenue		
City East Greenwich	State RI	Zip 02818	City North Providence	State RI	Zip 02904
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Richard Zompa			Director Name David Iannuccilli		
Street Address 1875 Mineral Spring Avenue			Street Address 655 Main Street		
City North Providence	State RI	Zip 02904	City East Greenwich	State RI	Zip 02818
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
1,000	NO PAR VALUE		500		

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



* 1 0 3 9 1 1 *

File Date 1-29-04
Check No. 0216
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] 1/7/04
Signature of Officer Date
Richard Zompa
Print or Type Name of Officer
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 OR PRINTED IN BLACK)

1. Corporate ID No. **103911** 2. Name of Corporation **Northeast Properties of New Hampshire, Inc.**
3. Street Address Principal Business Office **51 Jefferson Blvd.** City **Warwick** State **RI** Zip **02888**
4. Business Phone No. **(401) 941-1400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0**
7. Brief Description of the Character of Business Conducted in Rhode Island
Real Estate Holding

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

President Name Richard Zompa Street Address 1875 Mineral Spring Avenue City North Providence State RI Zip 02904	Vice President Name David Iannuccilli Street Address 655 Main Street City East Greenwich State RI Zip 02818
Secretary Name David Iannuccilli Street Address 655 Main Street City East Greenwich State RI Zip 02818	Treasurer Name Richard Zompa Street Address 1875 Mineral Spring Avenue City North Providence State RI Zip 02904

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

Director Name Richard Zompa Street Address 1875 Mineral Spring Avenue City North Providence State RI Zip 02904	Director Name David Iannuccilli Street Address 655 Main Street City East Greenwich State RI Zip 02818
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10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
1,000 NO PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value No
1,000 Common No

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



* 1 0 3 9 1 1 *

File Date: 2-18-03
189
Check No.: 10P
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.

Richard W. Zompa 1/17/03
Signature of Officer Date

Richard Zompa
Print or Type Name of Officer

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. **103911** 2. Name of Corporation **Northeast Properties of New Hampshire, Inc.**
3. Street Address Principal Business Office **51 Jefferson Blvd.** City **North Providence** State **RI** Zip **02904**
4. Business Phone No. **(401) 941-1400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0**
7. Brief Description of the Character of Business Conducted in Rhode Island
Real Estate Holding

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

President Name Richard Zompa Street Address 1875 Mineral Spring Avenue City North Providence State RI Zip 02904 Secretary Name David Iannuccilli Street Address 655 Main Street City East Greenwich State RI Zip 02818	Vice President Name David Iannuccilli Street Address 655 Main Street City East Greenwich State RI Zip 02818 Treasurer Name Richard Zompa Street Address 1875 Mineral Spring Avenue City North Providence State RI Zip 02904
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9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Richard Zompa Street Address 1875 Mineral Spring Avenue City North Providence State RI Zip 02904	Director Name David Iannuccilli Street Address 655 Main Street City East Greenwich State RI Zip 02818
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10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
1,000 NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
500	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: 02-11-02
Check No.: 1101
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] 02/14/02
Signature of Officer Date
Richard Zompa
Print or Type Name of Officer
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. **103911** 2. Name of Corporation **Northeast Properties of New Hampshire, Inc.**
3. Street Address Principal Business Office **51 Jefferson Boulevard** City **Warwick** State **RI** Zip **02888**
4. Business Phone No. **(401) 461-0100** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0**

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

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

President Name Richard Zompa	Vice President Name David Iannuccilli
Street Address 1875 Mineral Spring Avenue	Street Address 655 Main Street
City North Providence State RI Zip 02904	City East Greenwich State RI Zip 02818
Secretary Name David Iannuccilli	Treasurer Name Richard Zompa
Street Address 655 Main Street	Street Address 1875 Mineral Spring Avenue
City East Greenwich State RI Zip 02818	City North Providence State RI Zip 02904

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

Director Name Richard Zompa	Director Name David Iannuccilli
Street Address 1875 Mineral Spring Avenue	Street Address 655 Main Street
City North Providence State RI Zip 02904	City East Greenwich State RI Zip 02818
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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

AUTHORIZED SHARES

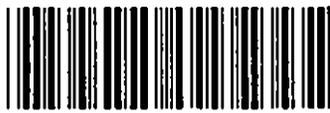
Number of Shares	Class/Series	Par Value
1,000	NO	PAR VALUE

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
500	Common	No Par

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



* 1 0 3 9 1 1 *

File Date: 1/19
Check No.: 136
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] 01/17/01
Signature of Officer Date

Richard Zompa

Print of Type Name of Officer

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. **103911** 2. Name of Corporation **Northeast Properties of New Hampshire, Inc.**
3. Street Address Principal Business Office **51 Jefferson Boulevard** City **Warwick** State **RI** Zip **02888**
4. Business Phone No. **(401) 461-0100** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**
7. Brief Description of the Character of Business Conducted In Rhode Island **Real Estate Holding**

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

President Name Richard Zompa	Vice President Name David Iannuccilli
Street Address 1875 Mineral Spring Avenue	Street Address 655 Main Street
City State Zip North Providence RI 02904	City State Zip East Greenwich RI 02818
Secretary Name David Iannuccilli	Treasurer Name Richard Zompa
Street Address 655 Main Street	Street Address 1875 Mineral Spring Avenue
City State Zip East Greenwich RI 02818	City State Zip North Providence RI 02904

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

Director Name Richard Zompa	Director Name David Iannuccilli
Street Address 1875 Mineral Spring Avenue	Street Address 655 Main Street
City State Zip North Providence RI 02904	City State Zip East Greenwich RI 02818
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
1,000 NO PAR VALUE		

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

ISSUED SHARES	Class/Series	Par Value
500	Common	No Par

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



* 1 0 3 9 1 1 *

FILED

File Date: _____

FEB 16 2000

Check No.: _____

By CE 118

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.

Richard P. Zompa 2-9-00
Signature of Officer Date

Richard Zompa
Print or Type Name of Officer

Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _____
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(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 103911 2. Name of Corporation Northeast Properties of New Hampshire, Inc.
3. Street Address Principal Business Office 51 Jefferson Boulevard City Warwick State RI Zip 02888
4. Business Phone No. (401) 461-0100 5. State of Incorporation Rhode Island 6. SIC Code _____
7. Brief Description of the Character of Business Conducted in Rhode Island Real Estate Holding

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

President Name <u>Richard Zompa</u>	Vice President Name <u>David Iannuccilli</u>
Street Address <u>1875 Mineral Spring Avenue</u>	Street Address <u>655 Main Street</u>
City <u>North Providence</u> State <u>RI</u> Zip <u>02904</u>	City <u>East Greenwich</u> State <u>RI</u> Zip <u>02818</u>
Secretary Name <u>David Iannuccilli</u>	Treasurer Name <u>Richard Zompa</u>
Street Address <u>655 Main Street</u>	Street Address <u>1875 Mineral Spring Avenue</u>
City <u>East Greenwich</u> State <u>RI</u> Zip <u>02818</u>	City <u>North Providence</u> State <u>RI</u> Zip <u>02904</u>

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

Director Name <u>Richard Zompa</u>	Director Name <u>David Iannuccilli</u>
Street Address <u>1875 Mineral Spring Avenue</u>	Street Address <u>655 Main Street</u>
City <u>North Providence</u> State <u>RI</u> Zip <u>02904</u>	City <u>East Greenwich</u> State <u>RI</u> Zip <u>02818</u>
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<u>1,000</u>	<u>common</u>	<u>no par</u>

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<u>500</u>	<u>common</u>	<u>no par</u>

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

File Date: 4-29-99

Check No.: 105

By: AMF

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.

Richard P. Zompa 4/27/99
Signature of Officer Date

Richard Zompa
Print or Type Name of Officer

President
Title of Officer