

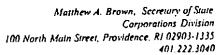
Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

Form 630 12/01

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.	2. Name of Corpora					
80517	Charles Stree	et Realty, Inc.				
3. Street Address Principal Bus	iness Office		City	State	Zip	
200 Charles Stre	et		Providence,	RI	02904	
4. Business Phone No.		5. State of Incorporate	ion		6. SIC Code	
401-861-9199		Rhode Island			5553	
7. Brief Description of the Cha	racter of Business Cond	lucted in Rhode Island				
To take, lease, pu	rchase, or other	erwise acquire an	d to to etc., in real	l estate, real pro	perty	
8. NAMES AND ADDRES	SSES OF THE OFF	ICERS ("X" BOX FOR A	TTACHMENT) FILL IN SP	ACES BEFORE USING AT	TACHMENTS	
President Name			Vice President Name		· · · · · · · · · · · · · · · · · · ·	
Michael E. Kelly,	Sr.		· Kathleen B. Kel	.ly		
Sireet Address			Street Address			
200 Charles Stree	et		.200 Charles Sti	reet		
Ciņ	State	Zip	City	State	Zip	
Providence,	RI	02904	· Providence,	RI	02904	
Secretary Name			Treasurer Name	_		
Kathleen B. Kelly	/ —		Michael E. Kell	y, Sr.		
Street Address			* Street Address			
200 Charles Street			.200 Charles Street			
Ciry	State	Zip	City	State	Zip	
Providence,	RI	02904	.Providence,	RI	02904	
	SSES OF THE DIRI	ECTORS ("X" BOX FOR	R <i>attachment)</i> 🛮 Fill in S	SPACES BEFORE USING	ATTACHMENTS	
Director Name			Director Name			
Michael E. Kelly			Kathleen B. Kel	lly		
Street Address			-Street Address			
200 Charles Stree	et		200 Charles Str	reet		
City	State	Zip	·City	State	Zıp	
Providence,	RI	02904	Providence,	RI	02904	
Director Name	• • • • • • • • • • • • • • • • • • • •		Director Name			
None			None			
Street Address			Street Address			
<u> </u>	70					
City	State	Zip	City	State	Zip	
		1		1	<u></u>	
10. SHARES AUTHORIZ	ZED_("X" BOX FOR	ATTACHMENT) ["BOX FOR ATTACHMEN	<i>"</i> "	
AUTHORIZED SHARES Number of Shares Class/Series Par Value			ISSUED SHARES Number of Shares	Class/Series	Par Value	
Number of Shares	Class/Series	Far vanie	rennaer of Shares	Ciassiseries	Tar value	
1,000	Common	No par	500	Common	No par	
		· · · · · · · · · · · · · · · · · · ·		<u> </u>		
<u> </u>						
This report must be sign	ied in ink by eithe	r the President, Vice	President, Secretary, Assi.	stant Secretary, Treasi	urer, Receiver or Trust	

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements.
File Daic By Check No.	and that all statements contained herein are true and correct. Adducted A Mily 3 - 10 · 0 · 5 Signorize of Officer Date Kathleen B. Kelly
FOR SECRETARY OF STATE USE ONLY	Vice President Title of Officer Form 6



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

ORM MUST BE TYPED Corporate ID No.	2. Name of Corpora						
80517	Charles Stree	et Realty, Inc.		- Ic	Zip		
Street Address Principal	Business Office	-	City	State RI	02904		
200 Charles St	reet		Providence,		6. SIC Code		
Business Phone No.		5. State of Incorpor			5553		
401-861-9199		Rhode Island	· · · · · · · · · · · · · · · · · · ·	<u>.</u>	3333		
o take, lease,		erwise acquire a	and to work etc., in re				
resident Name		ICERS ("X" BOX FOI	RATTACHMENT) FILL IN SP.		TACHSTEN 15		
Michael E. Kell	ly, Sr.		. Kathleen B. Kel	.1y	<u></u> -		
ireei Address			Street Address	coat			
200 Charles St	reet		. 200 Charles Str		Zip		
lity	State	Zip	City	State RI	02904		
Providence,	RI	02904	Providence,				
<i>creiury Name</i> (athleen B. Kel	lly		Michael E. Kell	y, Sr.			
ircet Address			* Street Address	* Street Address			
200 Charles St	reet		.200 Charles Str	.200 Charles Street			
ity	State	Zip	City	State	Zip		
Providence	RI	02904	.Providence,	RI	02904		
9. NAMES AND ADD	RESSES OF THE DIR	ECTORS ("X" BOX F	OR ATTACHMENT) FILL IN		ATTACHMENTS		
Michael E. Kel	ly, Sr.		Kathleen B. Ke	lly			
Sireei Address			Street Address				
200 Charles St	reet		200 Charles St	reet 			
City	State	Zip	·City	State	Zip		
Providence,	RI	02904	Providence,	RI	02904		
Director Name		<i></i>	Director Name				
None			None				
Street Address			Street Address				
- ·•··			•	16.22	· Zip		
City	State	Zip	City	State	1		
		(m) (2) (15) (m)	11 CHADES ISSUED /4	X" BOX FOR ATTACHMEN			
	RIZED ("X" BOX FOR	ALIACHMENI) U	ISSUED SHARES				
AUTHORIZED SHARES	Class/Series	l'ar Value	Number of Shures	Ciass/Series	For Value		
Number of Shares	Curavacues		·				
1,000	Common	No par	500	Common	No par		
·		<u></u>					
This report must ha	signed in ink hy pith	er the President Vi	ice President, Secretary, Ass	istant Secretary, Treas	urer, Receiver or Tri		
inis report must be	aigness in inte by citi	J	· · · · · · · · · · · · · · ·	•			



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) I. Corporate ID No. 2. Name of Corporation Charles Street Realty, Inc. *80517* State Zip 3. Street Address Principal Business Office PROVIDENCE RI 200 CHARLES STREET 02904 State of Incorporation 6. SIC Code 4. Business Phone No. RHODE ISLAND 5553 4018319199 7. Brief Description of the Chara eter of Business Conducted in Rhode Island / TO TAKE, LEASE, PURCHASE, OR OTHERWISE ACQUIRE AND TO WORK ETC. IN REAL ESTATE, REAL PROPERTY 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name , Vice President Name Kathleen B. Kelly Michael E. Kelly Street Address Street Address . 200 Charles Street 200 Charles Street State Zip Cin State Zip RI RI 02904 Providence, Providence, 02904 Secretary Name Treasurer Name Michael E. Kelly Kathleen B. Kelly Street Address Street Address .200 Charles Street 200 Charles Street City °Ciny State Zip State Zip 02904 RI 02904 Providence, RI . Providence, 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Kathleen B. Kelly Michael E. Kelly Street Address Street Address 200 Charles Street 200 Charles Street State Zip City State Zip City RI Providence, 02904 02904 Providence RI Director Name Director Name None None Street Address Siree Address

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

500

·City

ISSUED SHARES

Number of Shares

	•	٥	U	,	1	′	*	
**80517*	1/22/	031	1;5	4:0	1 Al	N.		
File Date		a	<u>/L</u>	IL	<u> 13</u>			_
Check No.		,	14	12	B			
Bv:				2	ज्ञ			
FOR SECRET	ARY C	F ST	TATE	US	E OI	NLY	•	_

State

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

Class/Series

Zip

Par Value

City

AUTHORIZED SHARES

1,000 COMM NO PAR VALUE

Number of Shares

Under penalty of perjury, I declare an	
this report, including any accompanyi	ing schedules and statements.
and that all statements contained here	in age true and correct.
Jacien B.	Killy =/12/03
Signature of Officer	Date
Kathleen B. Kelly	·
Print or Type Name of Officer	
Vice President	
Title of Otticer	Form 630 12/01

. . .

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

State

Class/Series

Common

Zip

Par Value

No Par

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR



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

(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No.

2. Name of Corporation

80517

Charles Street Realty, Inc.

3. Street Address Principal Business Office

200 CHARLES STREET

PROVIDENCE

City

State RHODE ISLAND

02904

4. Business Phone No.

5. State of Incorporation

6. SIC Code

(401) 831-9199

RHODE ISLAND

5553

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

REAL ESTATE

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

President Name

Michael Kelly

Street Address

200 Charles Street

Providence

Rhode Island

02904

Kathleen B. Kelly

Street Address

Secretary Name

200 Charles Street

Providence

02904 Rhode Island

Vice President Name Kathleen B. Kelly

Street Address

200 Charles Street

City Providence

Rhode Island

Treasurer Name

Kathleen B. Kelly

Street Address

200 Charles Street

City

Providence

State Rhode Island

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

Director Name Street Address

City

Director Name

Street Address

City

State

Street Address

Director Name

City

State

Director Name

Street Address

State

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

ZIp

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

Zip

ISSUED SHARES

Class/Series

Par Value

500

1,000 COMM NO PAR VALUE

Number of Shares

Common

No par value

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



FEB 28 2002

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 restrue and correct.

5

Form 630 12/01



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PR Fili

ROFIT CORPORATION	ANNUAL REPORT FOR THE YEAR 2001	STOP PLEASE READ
ing Period: January 1-March 1 •	Filing Fee: \$50.00	INSTRUCTIONS

	OP
PHASE	READ
INSURU	ПОХУ

	1 MUST BE TYPED IN BLA	CN				_
i. Corj	porate ID No.	2. Name of Corporation				
	0080517	CHARLES S	TREET REALTY, I	NC.		_,
3. Stre	et Address Principal Business			City	State	Złp 02004
	200 CHARLES ST	REET		PROVIDENCE,	RI	02904
l. Bus	Iness Phone No.		5. State of Incorporation	~ 1.0		6. SIC Code
	401-831-9199		RHODE I	SLAND		5553
. Brie	f Description of the Character REAL ESTATE	of Business Conducted In	Rhode Island			
3. N.	AMES AND ADDRES	SES OF THE OFFIC	CERS ("X" BOX FOR ATTA	CHMENT)	•	
	ent Name			Vice President Name		
	MICHAEL E. KEL	TX		KATHLEEN B. KE	ILLY	
treet	Address			Street Address		
	200 CHARLES ST	REET		200 CHARLES ST	REET	
City		State	Zip	City	State	Zip
	PROVIDENCE,	RI	02904	PROVIDENCE,	RI	02904
ecrete	ary Name			Treasurer Name	•	•
	KATHLEEN B. KE	LLY		MICHAEL E. KEI	TÄ	
treet	Address			Street Address	•	
	200 CHARLES ST	REET		200 CHARLES ST	REET	
City		State	Zip	City	State	Zip
	PROVIDENCE,	RI	02904	PROVIDENCE,	RI	02904
9. N	AMES AND ADDRES	SES OF THE DIRE	CTORS ("X" BOX FOR AT	TACHMENT)		
	or Name			Director Name		
	MICHAEL E. KEI	TA		KATHLEEN B. KE	ELLY	
Street	Address			Street Address		•
	200 CHARLES ST	REET		200 CHARLES ST	(REET	
City		State	ZIp	City	State	Zip
	PROVIDENCE,	RI	02904	PROVIDENCE,	RI	02904
Direct	or Name		•	Director Name	•	• .
Street	Address			Street Address		
Clly		State	Zip	City	State	Zip
10.	SHARES AUTHORIZE	D (*X* BOX FOR ATTA	ACHMENT)	11. SHARES ISSUED (* ISSUED SHARES	"X" BOX FOR ATTACHMENT	r)
AUTH		Class/Series	Par Value	Number of Shares	Class/Series	Par Value
	ber of Shares					

_	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and
4-6-01	that fill statements contained herein are true and correct.
Check No.: 567	Signalizate of Officer . Date # ATILIFFA) # FILY
By:	Print or pype Name of Officer
FOR SECRETARY OF STATE USE ONLY	Tiple of Officer

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

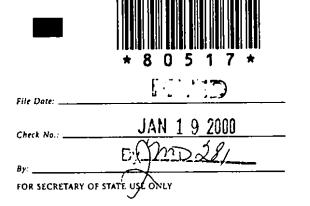
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

TE VEAD 2000

STOP PLEASE READ PASSECTIONS

		-			
(FORM MUST BE TYPED IN BLA					
1. Corporate ID No.	2. Name of Corporat				
80517	Charles S	treet Realty, Inc		.	* *-
3. Street Address Principal Business	Office		City	State	Zip
200 Charles S 4. Business Phone No. (401) 831-919		5. State of Incorporation RHODE ISLAND	Providence	RI	02904 6. SIC Code 5553
7. Brief Description of the Character	of Business Conducted In				
Real Estate 8. NAMES AND ADDRES President Name	SES OF THE OFFI	CERS ("X" BOX FOR ATTACH	IMENT) FILL IN SPACES I Vice President Name	BEFORE USING ATTACHN	IENTS
Michael E. Ke Street Address	elly		Kathleen B. Street Address	Kelly	
200 Charles S	Street State	Zip	200 Charles	Street	Zip
Providence Secretary Name	RI	02904	Providence Treasurer Name	RI	02904
Kathleen B. K	Celly		Kathleen B. Street Address	Kelly	
200 Charles S	Street		200 Charles	Street	
City	State	Zip	City	State	ZIp
Providence	RI	02904	Providence	RI	02904
9. NAMES AND ADDRES	SES OF THE DIRI	ECTORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACE Director Name	S BEFORE USING ATTAC	HMENTS
Michael E. Ke	elly		Kathleen B. Street Address 200 Charles	_	
200 Charles S	Street		200 Charles	Street	
City	State	Zip	City	State	Zip
Providence Director Name	RI .	02904	Providence Director Name	RI	02904
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	ED (*x" box for att	ACHMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value No par
1000 SHS COM NO	PAR VAL		500 .	common	value

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.

Signature of Officer

Michael E. Kelly

Print or Type Name of Officer
President

Title of Officer

ucha



Jumes R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BL	ACK)				
1. Corporate ID No.	2. Name of Corporation	on			_
0080517	CHARLES S	TREET REALTY, IN	C.		
3. Street Address Principal Busines 200 CHARLES ST			PROVIDENCE,	State RI	02904
4. Business Phone No. 401-831-9199		5. State of Incorporation RHODE ISLA	ND		6. SIC Code 5553
7. Brief Description of the Characte REAL ESTATE	er of Business Conducted in	Rhode Island			
8. NAMES AND ADDRE	SSES OF THE OFFIC	CERS ("X" BOX FOR ATTAC	HMENT) Vice President Name		•
MICHAEL E. KE	LLY		KATHLEEN B. KE	LLY	
Street Address 299 CHARLES S	TREET		Street Address 200 CHARLES ST		
PROVIDENCE,	State RI	^{Zip} 02904	PROVIDENCE,	State RI	^{zip} 02904
Secretary Name KATHLEEN B. KI	ELLY		Treasurer Name MICHAEL B. KEL	ТÄ	•
Street Address 200 CHARLES S	TREET		Street Address 200 CHARLES ST	REET	
PROVIDENCE,	State RI	^{Zip} 02904	PROVIDENCE,	State RI	^{Zip} 02904
9. NAMES AND ADDRE	SSES OF THE DIRE	CTORS ("X" BOX FOR ATT	ACHMENT)		
Director Name MICHAEL E. KE	ГТХ		Director Name KATHLEEN B. KE	LLY	
Street Address 200 CHARLES S	TREET		Street Address 200 CHARLES ST	TREET	
PROVIDENCE,	State RI	0290 4	PROVIDENCE,	State RI	02904
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZ	ED ("X" BOX FOR ATTA	CHMENT)	11. SHARES ISSUED (* ISSUED SHARES	X* BOX FOR ATTACHMENT	רז
Number of Shares	Class/Series	Por Value	Number of Shares	Class/Series	Par Value
1,000	COMMON	NO PAR VALUE	500	COMMON	NO PAR VALUE

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

File Date:	Mar 1199
Check No.:	262
Ву:	OFO.
	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 and true and correct.

MICHAEL E. KELLY

Print or Type Name of Officer

PRESIDENT

Title of Officer



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

ST	OP.
PLEASI INSTRU	(TIONS
	~ //

(FORM MUST BE TYPED IN BLA	CK)				
1. Corporate ID No.	2. Name of Corporat				
80517 3, Street Address Principal Business	. k	et Realty, Inc.	City	State	Zip
•			Providence	RI	02904
200 Charles 4. Business Phone No.	Street	S. State of Incorporation	: FIGVIGE	-L	6. SIC Code
(401) 831-91	99	RHODE ISLAN	ND		5553
7. Brief Description of the Character		-	· · · · · · · · · · · · · · · · · · ·		
Real Estate					
8. NAMES AND ADDRES	SES OF THE OFFI	CERS ("X" BOX FOR ATTAC	CHMENT) FILL IN SPACES BE	FORE USING ATTACI	IMENTS .
President Name Michael E. Ke			Vice President Name Kathleen B.		
Street Address	·		Street Address		
200 Charles S	treet		. 200 Charles	Street	
City	State	Zip	City	State	Zip
Providence	RI	02904	Providence	RI	02904
Secretary Name Kathleen B. K	elly		Treasurer Name Michael E. K	elly	
Street Address		 	Street Address	,	
200 Charles S	treet		200 Charles	Street	
City	State	Zip	City	State	7.1p
Providence	ı RI	02904	: Providence	RI	02904
9. NAMES AND ADDRES	SES OF THE DIRE	CTORS (*X* BOX FOR AT	TACHMENT) L. FILL IN SPACES Director Name	BEFORE USING ATTA	CHMENTS
Michael E. Ke	11v		Kathleen B.	Kelly	
Street Address	·		Street Address		
200 Charles S	treet		200 Charles	Street	
City	State	Zip	City	State	Zip
Providence	RI	02904	Providence	RI	02904
Director Name			Director Name		
	- .		<u> </u>		
Street Address	- ·		Street Address		
City	State	Zip	City	State	Zip
City	1	:	•		
10. SHARES AUTHORIZE	D CY BOY FOR ATT	ACHMENT)	11. SHARES ISSUED (*X*	BOX FOR ATTACHMENT	,
AUTHORIZED SHARES	D CA BOATONAL	To the state of th	ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shates	Class/Series	Par Value
			500	Common	No _{Par} Value
1000 SHS COM NO	PAR VAL		300		Value
-	. 	- · -			
					<u> </u>
This report must be size	ned in ink by sith	her the President Vice	President, Secretary, Assist	ant Secretary Treasu	rer. Receiver or Trust
Ting report must be sign	ica in law by eiti	ici die riesidem, vice	. i tesidelle, secielary, rissist	veeretary, measu	,
j 1 9 618	 	10 00			
		 			7

	* 8 0 5 1 7 *		Under penalty of perjury, I declare and affirm that ! have examined
	PAID		this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
File Date:	FEB 1 2 1999 HOS		Mechael & Kelly 5 Feb 99 Signature of Officer Date
Ву:	SECY OF STATE		MICHAEL E. KELLY Print or Type Name of Officer
FOR SECRETARY OF	STATE USE ONLY .	1	President



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

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

STO)P)
PLEASE	READ:
IVALKEC	TION

(FORM MUST BE TYPED IN BLA					
1. Corporate ID No.	2. Name of Corporatio		wa.		
0080517 3. Street Address Principal Business		TREET REALTY, I	INC . City	State	Zip
3. Street Address Principal Business	Office		,		02904
200 CHARLES STF	REET	S. State of Incorporation	PROVIDENCE,	RI	6. SIC Code
401-831-9199		RHODE IS	LAND		5553
7. Brief Description of the Character REAL ESTATE	of Business Conducted in	Rhode Island			
8. NAMES AND ADDRESS President Name	SES OF THE OFFIC	ERS ("X" BOX FOR ATTAC	HMENT) - Vice President Name		
MICHAEL E. KELI	LY .		KATHLEEN B. KI	ELLY	
Street Address 200 CHARLES STE	REFT!		Street Address 200 CHARLES ST	reer	
PROVIDENCE,	State RI	^{Zip} 02904	PROVIDENCE,	State RI	^{21p} 02904
Secretary Name			Treasurer Name		•
KATHLEEN B. KEI	TLY		MICHAEL B. KEI	LLY	
200 CHARLES ST	REET		200 CHARLES ST	TREET	
PROVIDENCE,	State RI	02904	PROVIDENCE,	State RI	^{21p} 02904
9. NAMES AND ADDRES	SES OF THE DIREC	CTORS ("X" BOX FOR AT	TACHMENT)		
Director Name			Director Name		
MICHAEL E. KELI	LY		KATHLEEN B. KI	#LLY **	
Street Address 200 CHARLES STE	REET		Street Address 200 CHARLES ST	reet	
City	State RI	zıp 02904	PROVIDENCE,	State RI	zιρ 02904
PROVIDENCE,	KI.	02904	Director Name		02504
Director Name			Diffin Hant		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE	D ("X" BOX FOR ATTA	CHMENT)	11. SHARES ISSUED (* ISSUED SHARES	X° BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	COMMON NO	PAR VALUE	500	COMMON	NO PAR VALU

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 decla
	this report, including any accom
2 2 A Q Q	that all statements contained he
File Date:	mil liel
170	Signature of Officer
Check No.:	MICHAEL E. KELLY
. 1(1)	Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	PRESIDENT
LOK SECKEINKE OF SINE OSE OVEL	Title of Officer

Inder 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.

In a statement of Officer

MICHAEL E. KELLY

Print or Type Name of Officer

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

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.

2. Name of Corporation

0080517

Charles Street Realty,

3. Street Address Principal Business Office

State

Zip

200 Charles Street

Providence

02904

4. Business Phone No.

5. State of Incorporation

RI

6. SIC Code

(401) 831-9199

Rhode Island

5553

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

Real Estate

Michael E. Kelly

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

President Name

Vice President Name

Kathleen B. Kelly

Street Address

Street Address

200 Charles Street

Zip

Zip

200 Charles Street

City

Providence

RI 02904 Providence Treasurer Name

City

RI

02904

Secretary Name

Kathleen B. Kelly

Michael E. Kelly

Street Address

200 Charles Street

Michael E. Kelly

200 Charles Street

Street Address 200 Charles Street

City Providence

RI

02904

Providence

RI

02904

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

Director Name

Street Addiess

Director Name

Kathleen B. Kelly

Street Address

200 Charles Street

City

State

210

Providence

RI

Director Name

02904

2.10

Providence Director Name

RI

02904

Street Address

Street Address

City

State

Zip

Par Value

City

State

Zip

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

AUTHORIZED SHARES

ISSUED SHARES Number of Shares

Class/Series

Par Value

1,000

Number of Shares

common

Class/Series

no par value

500

common

no par value

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

CRETARY 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

Michael E. Kelly

Print or Type Name of Officer

President Title of Officer

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

OURGEST THEORY BURNESS OFFICE OUT OF STATE OUT OF STATE OUT	PRATE ID INO	2. NAME OF CORPORATION	PLEASE TYPE OR PR	INT IN BLACK INK.		
THE PROPERTY ADDRESS DEFINE TO THE PROVIDENCE RI 02904 200 CHARLES STREET SIMILE OF MONOROUNDON SAMO REAL ESTATE 3 N A M E S A N D A D D RESSES OF THE OFFICERS WE RESPONDENCE RI 02904 WITCHAEL E. KELLY ADDRESS 200 CHARLES STREET PROVIDENCE RI 02904 PROVIDENCE RI 02904 WITCHAEL B. KELLY ADDRESS 200 CHARLES STREET PROVIDENCE RI 02904 PROVIDENCE RI 0290			TREET REALTY, INC			
RESPONDENCE OF THE OFFICERS ACTION OF THE OFFICERS REAL ESTATE 8. NAMES AND ADDRESSES OF THE OFFICERS MICHAEL E. KELLY ANDRESS 200 CHARLES STREET PROVIDENCE RI 02904 RATHLEEN B. KELLY STRETADORSS 200 CHARLES STREET PROVIDENCE RI 02904 PROVIDENCE, RI 02904 PROVIDENCE SINTERET 02906 PROVIDENCE SINTERE	•	1	· · · · · · · · · · · · · · · · · · ·		STATE	ZP COOE
REAL ESTATE 8. NAMES AND ADDRESSES OF THE OFFICERS MICHAEL E. KELLY MICHAEL E. KELLY ADDRESS 200 CHARLES STREET PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE, RI 02904 PROVIDENCE RI 02904 PROVIDENCE, RI 02904 PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE, RI 02904 PROVIDENCE RI 02904 PROVIDENCE, R		REET	S. STATE OF INCORPORATION	PROVIDENCE	RI	02904
BY HAMES AND ADDRESSES OF THE OFFICERS WENTERDOUTH MANY MICHAEL E. KELLY ADDRESS 200 CHARLES STREET STATE PROVIDENCE RI 02904 ARTHLEEN B. KELLY MICHAEL B. KELLY MICHAEL B. KELLY ADDRESS 200 CHARLES STREET PROVIDENCE RI 02904 ARTHLEEN B. KELLY MICHAEL B. KELLY MICHAEL B. KELLY STRETA ADDRESS 200 CHARLES STREET PROVIDENCE, RI 02904 PROVIDENCE STREET 2000 CHARLES STREET 2000 CHARLES STREET PROVIDENCE STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS MARKET OF SWARES MARK		Business conducted in Rhoof)		5553
MICHAEL E. KELLY ADDRESS 200 CHARLES STREET PROVIDENCE RI 02904 KATHLEEN B. KELLY ADDRESS 200 CHARLES STREET PROVIDENCE RI 02904 KATHLEEN B. KELLY ADDRESS 200 CHARLES STREET ADPROVIDENCE RI 02904 PROVIDENCE RI 02904 STRETA ADDRESS 200 CHARLES STREET 200 CHARLES STREET PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE STREET 200 CHARLES STREET PROVIDENCE STREET 200 CHARLES STREET 200 CHARLES STREET PROVIDENCE SIMIT DEPCOOF SIMIT ADDRESS 200 CHARLES STREET 200 CHA	REAL ESTATE		MES AND ADDRE	SSES OF THE OFF	I CERS	
ADDRESS 200 CHARLES STREET PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE PROVIDENCE PROVIDENCE, STREET 200 CHARLES STREET STREET 200 CHARLES STREET STREET 200 CHARLES STREET STREET PROVIDENCE, RI 02904 PROVIDENCE PROVIDENCE PROVIDENCE MICHAEL E. KELLY STREET ADDRESS 200 CHARLES STREET ORINANE MICHAEL E. KELLY KATHLEEN B. KELLY KATHLEEN B. KELLY STREET ADDRESS 200 CHARLES STREET ORINANE MICHAEL E. KELLY STREET ADDRESS 200 CHARLES STREET ORINANE MICHAEL E. KELLY STREET ADDRESS 200 CHARLES STREET OR HAME AUTHORIZED STREET OR HAME AUTHORIZED SHARES AUTHORIZED SHARES MIMBER OF SHARES CLASS/SERES PREVAULE MICHAEL B. KELLY KATHLEEN B. KELLY STREET ADDRESS STREET O2904 PROVIDENCE, RI 02904 PROVIDENCE, STREET STREET STREET STREET STREET STREET STREET DP COOK STREET ADDRESS STREET STREET STREET STREET DP COOK STREET ADDRESS STREET STREET DP COOK STREET ADDRESS STREET DP COOK STREET ADDRESS STREET STREET DP COOK STREET ADDRESS STREET STREET DP COOK STREET ADDRESS STREET STREET DP COOK STREET ADDRESS STREET STREET STREET STREET DP COOK STREET ADDRESS STREET	HT NAME		and the second			·
200 CHARLES STREET PROVIDENCE RI 02904 PROVIDENCE, RI 02904 PROVIDENCE, RI 02904 PROVIDENCE, RI 02904 PROVIDENCE, RI 02904 PROVIDENCE RI 02904 PROVID		LLY		KATHLEEN B.	KELLY	
PROVIDENCE RI 02904 PROVIDENCE RI 02904 INFASSIRIA NAME KATHLEEN B. KELLY TACORESS 200 CHARLES STREET PROVIDENCE, RI 02904 PROVIDENCE RI 02904 9. HAMES AND ADDRESSES OF THE DIRECTORS DIRECTOR NAME MICHAEL E. KELLY MICHAEL E. KELLY STRETT ADDRESS 200 CHARLES STREET O2904 PROVIDENCE RI 02904 STRETT ADDRESS 200 CHARLES STREET O2904 PROVIDENCE RI 02904 FROVIDENCE RI 02904 FROVIDENCE RI 02904 PROVIDENCE RI 02904		IREET		200 CHARLES	STREET	
KATHLEEN B. KELLY 200 CHARLES STREET PROVIDENCE, RI 02904 PROVIDENCE RI 02904 9. NAMES AND ADDRESSES OF THE DIRECTORS MICHAEL E. KELLY TADORESS 200 CHARLES STREET, PROVIDENCE RI 02904 DRECTOR NAME TADORESS STREET ADDRESS MICHAELE B. KELLY STREET ADDRESS DRECTOR NAME DRECT			1	PROVIDENCE	7 -	· ·
200 CHARLES STREET PROVIDENCE, RI 02904 PROVIDENCE RI 02904 9. NAMES AND ADDRESSES OF THE DIRECTORS DIRECTOR NAME MICHAEL E. KELLY TADORESS 200 CHARLES STREET, PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE, RI 02904 PROVIDENCE, RI 02904 PROVIDENCE, RI 02904 PROVIDENCE, RI 02904 TOR NAME TADORESS STREET ADDRESS MIMBER OF SHARES LISUIED SHARES MIMBER OF SHARES CLASS / SERIES PAR VALUE MIMBER OF SHARES CLASS / SERIES PAR VALUE MIMBER OF SHARES CLASS / SERIES PAR VALUE PROVIDENCE RI 02904 DECOME STREET ADDRESS ISSUED SHARES PAR VALUE PROVIDENCE AUTHORIZED SHARES CLASS / SERIES PAR VALUE PROVIDENCE STREET ADDRESS AUTHORIZED SHARES CLASS / SERIES PAR VALUE PROVIDENCE COTY STATE ZP CODE PROVIDENCE STREET ADDRESS STREET ADDRESS AUTHORIZED SHARES CLASS / SERIES PAR VALUE PROVIDENCE COTY STATE ZP CODE PROVIDENCE PROVIDENCE COTY STATE ZP CODE PROVIDENCE PROVIDENCE PROVIDENCE COTY STATE ZP CODE PROVIDENCE PROVIDENCE PROVIDENCE PROVIDENCE STATE ZP CODE PROVIDENCE PR	KATHLEEN B. K	ELLY		MICHAEL B. H	KELLY	
PROVIDENCE, RI 02904 PROVIDENCE RI 02904 9. NAMES AND ADDRESSES OF THE DIRECTORS DIRECTORIAME MICHAEL E. KELLY TADORESS 200 CHARLES STREET, PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE, RI 02904 PROVIDENCE, RI 02904 PROVIDENCE, RI 02904 PROVIDENCE, RI 02904 STREET ADDRESS NAMES OF SHARES AUTHORIZED AND ISSUED SHARES NAMES OF SHARES AUTHORIZED SHARES NAMES OF SHARES CLASS/ SERIES PAR WALLE NAMES OF SHARES CLASS/ SERIES PAR WALLE NAMES OF SHARES CLASS/ SERIES PAR WALLE NAMES OF SHARES PAR WALLE PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE RI 02904 PROVIDENCE PR	200 CHARLES ST	TREET	7F 0105	200 CHARLES	STREET	
MICHAEL E. KELLY TORRISS 200 CHARLES STREET, 200 CHARLES STREET, PROVIDENCE PROVIDENCE RI 02904 PROVIDENCE, FI ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS OTY STATE DP COOE AUTHORIZED SHARES NUMBER OF SHARES OLASS / SERIES PAR VALUE OTHER TORRISES OLASS / SERIES PAR VALUE NUMBER OF SHARES OLASS / SERIES PAR VALUE NUMBER OF SHARES OLASS / SERIES PAR VALUE OTHER TORRISES OLASS / SERIES OLASS / SER		RI	02904			02904
TADDRESS 200 CHARLES STREET, STATE PROVIDENCE RI 02904 PROVIDENCE, RI 02904 PROVIDENCE, RI 02904 DIRECTOR HAME STATE 200 CHARLES STREET DIP CODE STATE 200 CHARLES STREET DIP CODE STATE 200 CHARLES STREET DIP CODE STATE DIP CODE STATE 10. S H A R E S A U T H O R I Z E D A N D I S S U E D AUTHORIZED SHARES NUMBER OF SHARES CLASS / SERIES PAR VALUE PROVIDENCE STATE 200 CHARLES STREET 200 CHARLES STATE 200				DIRECTOR NAME		
PROVIDENCE RI 02904 PROVIDENCE, RI 02904 TOR NAME STATE ZIP CODE TOR NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS OTY STATE ZIP CODE 1 0 . S H A R E S A U T H O R I Z E D A N D 1 S S U E D AUTHORIZED SHARES MUMBER OF SHARES CLASS/SERIES PAR VALUE NUMBER OF SHARES CLASS/SERIES PAR VALUE NUMBER OF SHARES CLASS/SERIES PAR VALUE NUMBER OF SHARES CLASS/SERIES PAR VALUE		LLY			KELLI	
PROVIDENCE RI 02904 PROVIDENCE, RI 02904 TOR MAKE TADORESS STREET ADORESS STATE JP CODE OTY STATE JP CODE AUTHORIZED SHARES MIMBER OF SHARES CLASS/SERIES PAR VALUE MUMBER OF SHARES CLASS/SERIES PAR VALUE	200 CHARLES S					
STREET ADDRESS STREET ADDRESS STREET ADDRESS OTY STATE ZIP CODE 1 0 . S H A R E S A U T H O R I Z E D A H D 1 S S U E D AUTHORIZED SHARES NUMBER OF SHARES OLASS / SERIES PAR VALUE MANBER OF SHARES CLASS / SERIES PAR VALUE			1	PROVIDENCE,	1	1
STATE ZP CODE OTY STATE ZP CODE 1 0 . S M A R E S A U T M O R I Z E D A N D 1 S S U E D AUTHORIZED SHARES ISSUED SHARES NUMBER OF SHARES CLASS / SERIES PAR VALUE NUMBER OF SHARES CLASS / SERIES PAR VALUE	AR HAME			DIRECTOR HAME		
1 0 . S H A R E S A U T H O R I Z E D A H D 1 S S U E D AUTHORIZED SHARES NUMBER OF SHARES OLASS / SERIES PAR VALUE MANBER OF SHARES CLASS / SERIES PAR VALUE	ADORESS			STREET ADDRESS		
AUTHORIZED SHARES ISSUED SHARES NUMBER OF SHARES CLASS / SERIES PAR VALUE MANBER OF SHARES CLASS / SERIES PAR VALUE	- 	STATE	ZIP CODE	ary	STATE	ZIP C0:06
MUMBER OF SHARES CLASS / SERIES PAR VALUE NUMBER OF SHARES CLASS / SERIES PAR VALUE		10. S	HARES AUTHORI	ZED AND ISSUED		
	MUNDED OF CHADCE		OAR VALUE	MINISTR OF CHARGE		Post VALUE
1.000 COMMON NO PAR VALUE I SOO I COMMON INO PAR VALUE	1,000	COMMON	NO PAR VALUE	500	COMMON	NO PAR VALUE
			· · · · · · · · · · · · · · · · · · ·		<u> </u>	
This report must be SIGNED IN INK by either the			is report must be SIGN	NED IN INK by either the	·	<u>l.,</u>
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee	Pres					ee
Under penalty of perjury, I declare and affirm that I have exam report, including any accompanying schedules and statements.						

File Date: Check No:

For Secretary of State Use Only

Ву:

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

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.

0080517 Corporate ID:			Annual Report for the year:			
Charle	s Street					
Name of Corporation:	of principal office:	 -		heck one): pration (See RIGL Chapter prvice Corporation (See RI		
Phone: ()			Brief statement of th	ne character of business con	nducted in Rhode Island:	
Address and telephone of the principal office of but Island (Provide street address - Not P.O. Box):	isiness entity in Rho	ode	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
200 Charles Street PROVIDENCE, RI 02909	ļ		**************************************			
Phone: ()	4					
	THE NAM	AES OF TH	E OFFICERS ARE:			
PRESIDENT	<u>,</u> ,	STREET ADDR	ESS	CHY/STATE	ZIP CODE	
vice PRESIDENT Helly	<u> </u>	200 C	hailes St.	CITY/STATE	RI 02904 ZIPCODE	
SECRETARY		STREET ADDR	ESS	CITY/STATE	7.IP CODE	
TREASURER		STREET ADDR	ESS	CITY/STATE	ZIP CODE	
	THE NAM	ES OF THE	DIRECTORS ARE			
NAME		STREET ADDR		CITYSTATE	ZIP CODE	
NAME		STREET ADDR	IESS	CITY/STATE:	ZIP CODE	
NAME		STREET ADDR	RESS	CITY/STATE	7IP CODE	
NUMBER OF SHARES AUTHORIZED (Rider may	be attached)		NUMBER OF SHARES	ISSUED AND OUTSTAND!	NG (Rider may be attached)	
Number of Shares Class / Series			Number of Shares	Class / Series		
1,000 Commo	لد		500	Comn	non	
Date 44 1 . 1	9 <u>95</u>	By: Mu	Charl Fell HAEL HEL SHAMPOFOINGER SIGNING ICER SIGNING	ly		
	ATED REGIST		NT FOR SERVICE	OF PROCESS:		

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

THOMAS J. REILLY, JR. 1040 TURKS HEAD BUILDING PROVIDENCE RI 02903 FILED 149:3