

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

IMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

	OOR PRINTED IN BLACK	")			
		<u> </u>			
1. ID No	1	name of the limited Hability company			
127118		EVELOPMENT, LLC			
3. State of Formation 4. Brief description of the character of the husiness			•		
RHODE ISLAND	ACQUIRE	, OWN, DEVELOP, MORTG	AGE, SELL OR TRANSFER REAL	_ ESTATE	
5. Principal office address			City	State	Zip
225 Greenslitt Avenue			Pawtucket	RI	02861
6. mailing addr	ESS OF LIMITED LIA	BILITY COMPANY AND N	IAME OR TITLE OF CONTACT	PERSON:	
Contact Name			Contact Title		
Edward O.	Ferland		Manager		
Street Address			City	State	Zip
225 Greens	litt Avenue		Pawtucket	RI	02861
			ATTACHMENTS ("X" BOX FO IS FILING OF AMENDMENT, R.		/ 7-16-52
Manager Name	NY MODIFICATIONS				/ 7-16-52
Manager Name Edward O. Street Address	NY MODIFICATIONS		S FILING OF AMENDMENT, R.		/ 7-16-52
Manager Name Edward O. Street Address 225 Greens	Ferland	TO MANAGERS REQUIRE	S FILING OF AMENDMENT, R. Manager Name Street Address	I.G.L. 7-16-12 (a) (2)	
Manager Name Edward O. Street Address 225 Greens City	Ferland Slate	TO MANAGERS REQUIRE	S FILING OF AMENDMENT, R. Manager Name		/ 7-16-52
Manager Name Edward O. Street Address 225 Greens	Ferland	TO MANAGERS REQUIRE	S FILING OF AMENDMENT, R. Manager Name Street Address	I.G.L. 7-16-12 (a) (2)	
Manager Name Edward O. Street Address 225 Greens Guy Pawtucket Manager Name	Ferland Slate	TO MANAGERS REQUIRE	S FILING OF AMENDMENT, R. Manager Name Street Address City Manager Name	I.G.L. 7-16-12 (a) (2)	
Manager Name Edward O. Street Address 225 Greens City Pawtucket Manager Name	Ferland Slate	TO MANAGERS REQUIRE	S FILING OF AMENDMENT, R. Atanager Name Street Address City	I.G.L. 7-16-12 (a) (2)	
Manager Name Edward O. Street Address 225 Greens City Pawtucket	Ferland Slate	TO MANAGERS REQUIRE	S FILING OF AMENDMENT, R. Manager Name Street Address City Manager Name	I.G.L. 7-16-12 (a) (2)	
Manager Name Edward O. Street Address 225 Greens Guy Pawtucket Manager Name Street Address	Ferland Slitt Avenue State RI State	Zup 02861	S FILING OF AMENDMENT, R. Manager Name Street Address Alanager Name Street Address City	State State	Zip
Manager Name Edward O. Street Address 225 Greens City Pawtucket Manager Name Street Address City	Ferland Slitt Avenue State RI State	Zup 02861	S FILING OF AMENDMENT, R. Manager Name Street Address City Alanager Name Street Address	State State	Zip
Manager Name Edward O. Street Address 225 Greens City Pawtucket Manager Name Street Address City 8. RESIDENT AGE	Ferland Slate RI State NT IN RHODE ISLAN	Zup 02861	S FILING OF AMENDMENT, R. Manager Name Street Address City City City City nges require filing of Form 6	State State	Zip
Manager Name Edward O. Street Address 225 Greens City Pawtucket Manager Name Street Address City 8. RESIDENT AGE Agent Name	Ferland Slate RI State NT IN RHODE ISLAN	Zup 02861	S FILING OF AMENDMENT, R. Manager Name Street Address City City City City nges require filing of Form 6	State State	Zip

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

File Date	9 05 127118			
Check No.	1019	_		
Ву:	DA	_		
FOR SE	ECRETARY 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.

Willelf (t)

Dute

Edward O. Ferland

Print or Type Name of Authorized Person



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Matthew A. Brown, Secretary of State

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR ______ 2004_

Corporations Division 100 North Main Street Providence, RI 02903-1335 401-222,3040

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

(FORM MUST BE TYP	PED OR PRINT	TED IN BIACK)						
1. ID No.	2. Exact	Exact name of the limited liability company						
127118	EFC D	DEVELOPMENT, LLC						
3 State of Formation	turn 4. Brief description of the character of the histings wh			s which is actually conducted in Rhodo	nch is actually conducted in Rhode Island			
RHODE ISLAND ACQUIRE, OWN, DEVELOP, MORTGAGE			GE, SELL OR TRANSFER REAL	SELL OR TRANSFER REAL ESTATE				
5 Principal office address			City	State	Z.Ip			
225 Greenslitt Avenue			Pawtucket	RI	02861			
6. MAILING ADD	RESS OF L	IMITED LIABIL	ITY COMPANY AND NA	ME OR TITLE OF CONTACT	PERSON:	•		
Contact Name				Contact Title				
Edward 0.	. Ferla	ınd		Manager				
Street Address				City	State	Zip		
225 Green	225 Greenslitt Avenue			Pawtucket	RI	02861		
		FILL IN SPA	CES BEFORE USING AT	IABILITY COMPANY, IF APPL TTACHMENTS ("X" BOX FO FILING OF AMENDMENT, R. :	R ATTACHMENT	, —		
Manager Name				Manager Name	Manager Name			
Edward O.	. Ferla	ınd						
Since Address 225 Greenslitt Avenue			Street Address	Street Address				
Pawtucket	t	State RI	^{2/p} 02861	City	State	Zip		
Manager Name			Manager Name					
Sinyi Address			Street Address					
City		State	Zip	City	State	<i>7.</i> tp		
8. RESIDENT AG	ENT IN RH	ODE ISLAND -	DO NOT ALTER - Chan	iges require filing of Form 6	1 542 - R.I.G.L. 7-1	6-11		
ARCHIBALD B. KE	NYON, JR.					 		
Address			City	Zip				
133 OLD TOWER HILL ROAD			WAKEFIELD	KEFIELD 02879-				

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

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Marie Court No.	
File DateSEP_1 0-2004	
Check No. By 38 CM	
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.

X	THELLEUV	9/1/04
}	Signature of Authorized Person	Date
	Edward FER	land
	Print or Type Name of Authorized Pers	



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

Matthew A. Brown, Secretary of State

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

Corporations Division 100 North Main Street Procidence, Rt 92993-1335 401-222-3040

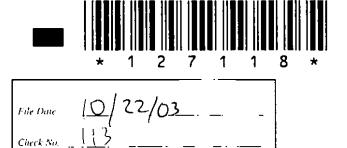
LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR _

2003

(FORM MUST BE TYPEL	O OR PRINTED IN BLACK)					
1 //D No 127118	1	2 Exact name of the limited hability company EFC DEVELOPMENT, LLC				
3 State of Formation	i Brief description	3. Buyl description of the character of the business which is actually conducted in Rhode Island				
RHODE ISLAND Acquire, Own, Deve			lop, mortgage, sell or transfer real estate			
5. Ermepal office addre	es		City	State	Zij:	
225 Greenslitt Avenue			Pawtucket	RI	02861	
Contact Name	ess of limited Habit . Ferland	ITY COMPANY AND N	AME OR TITLE OF CONTACT Connact Tale Manager	PERSON:		
Sreet Address		· · ·	<i>c.a</i> ₁	State	Zφ	
225 Green	slitt Avenue		Pawtucket	RI	02861	
ANY MODIFICATIONS TO MANAGERS REQUIRE Manager Name Edward O. Ferland Street Address 225 Greenslitt Avenue		Manager Name Street Address				
Pawtucket	State RI	^{Zip} 02861	City	State	Zqp	
Manager Name			Manager Name			
Street Address			Street Address			
Guy	State	Zip	City	State	Zφ	
8. RESIDENT AGE Agent Name ARCHIBALD B. KEN		DO NOT ALTER - Cha	nges require filing of Form Address		<u>.</u>	
	·		Z 5.	7.0	- -	

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

WAKEFIELD



FOR SECRETARY OF STATE USE ONLY

133 OLD TOWER HILL ROAD

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.

02879-

Signature of Authorized Person

Date