



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

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. 96719		2. Exact name of the limited liability company Foundry Parcel Fifteen Associates, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO ACQUIRE, DEVELOP, MANAGE, IMPROVE, RENT, LEASE AND SELL REAL AND PERSONAL PROPERTY	
5. Principal office address 235 Promenade Street		City Providence	State RI
		Zip 02908	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Thomas Guerra		Contact Title	
Street Address 235 Promenade Street		City Providence	State RI
		Zip 02908	
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 None		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name DAVID J. TRACY		Address	
Address ONE FINANCIAL PLAZA, SUITE 1800		City PROVIDENCE	Zip 02903

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



96719

File Date	FILED
Check No.	FEB 01 2006
By:	88703
By: 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 **10/21/05**
Thomas Guerra, Authorized Person
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

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

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 96719		2. Exact name of the limited liability company Foundry Parcel Fifteen Associates, LLC			
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Street Address 235 Promenade Street		City Providence	State RI	Zip 02908	
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 None			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 DAVID J. TRACY			Address		
Address ONE FINANCIAL PLAZA, SUITE 1800			City PROVIDENCE	Zip 02903	

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



* 9 6 7 1 9 *

File Date	10-4-04
Check No.	16278
By:	AME
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.

Antonio Guerra 9/30/04
Signature of Authorized Person Date
Antonio Guerra, Managing General Partner of
The Foundry Associates, L.P., its Member
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

Corporations Division
100 North Main Street
Providence, RI 02903-1355
401 222 3040

2003

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 96719		2. Exact name of the limited liability company Foundry Parcel Fifteen Associates, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO ACQUIRE, DEVELOP, MANAGE, IMPROVE, RENT, LEASE AND SELL REAL AND PERSONAL PROPERTY	
5. Principal office address 235 Promenade Street		City Providence	State RI
		Zip 02908	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Antonio Guerra		Contact Title	
Street Address 235 Promenade Street		City Providence	State RI
		Zip 02908	
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 None		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		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 DAVID J. TRACY		Address	
Address ONE FINANCIAL PLAZA, SUITE 1800		City PROVIDENCE	Zip 02903

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



File Date	FILED
Check No.	SEP 29 2003
By	By <i>[Signature]</i>
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.

Antonio Guerra 9/21/03
Signature of Authorized Person Date
Antonio Guerra, Managing General Partner of
The Foundry Associates, L.P., its Member
Print or Type Name of Authorized Person



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

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

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. 96719		2. Exact name of the limited liability company Foundry Parcel Fifteen Associates, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO ACQUIRE, DEVELOP, MANAGE, IMPROVE, RENT, LEASE AND SELL REAL AND PERSONAL PROPERTY			
5. Principal office address 235 Promenade Street		City Providence	State RI	Zip 02908	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Antonio Guerra		Contact Title			
Street Address 235 Promenade Street		City Providence	State RI	Zip 02908	
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 None		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 DAVID J. TRACY		Address			
Address ONE FINANCIAL PLAZA, SUITE 1800		City PROVIDENCE	Zip 02903		

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



* 9 6 7 1 9 *

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	FILED
Check No.	OCT 16 2002
By:	By 13234
FOR SECRETARY OF STATE USE ONLY	

Antonio Guerra 10/10/02
Signature of Authorized Person Date
Antonio Guerra, Managing General Partner of
The Foundry Associates, L.P., its Member
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 96719

Annual Report for the year 2001

1. The name of the limited liability company is:

Foundry Parcel Fifteen Associates, LLC

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

235 Promenade Street, Providence, RI 02908

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: DAVID J. TRACY, ESQ.

MCGOVERN NOEL & BENIK, INC. ONE BANKBOSTON PLAZA 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: Antonio Guerra c/o The Foundry Associates

235 Promenade Street, Providence, RI 02908

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: To acquire, develop, manage, improve, rent, lease and sell real and personal property.

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

None

Dated August 29, 2001



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.

Foundry Parcel Fifteen Associates, LLC

Exact Name of Limited Liability Company

The Foundry Associates, L.P., its Member

By Antonio Guerra

Managing General Partner

Title

Form No. 632
Revised 01/99

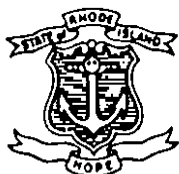
FOR SECRETARY OF STATE USE ONLY	
File Date:	FILED
Check No.:	OCT 09 2001
By:	<u>By 611719</u>

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 county clerk's office.

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 96719

Annual Report for the year 2000

1. The name of the limited liability company is:

Foundry Parcel Fifteen Associates, LLC

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

235 Promenade Street, Providence, RI 02908

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: DAVID J. TRACY, ESQ.

MCGOVERN NOEL & BENIK, INC. ONE BANKBOSTON PLAZA 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: Antonio Guerra, c/o The Foundry Associates

235 Promenade Street, Providence, RI 02908

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: To acquire, develop, manage, improve, rent, lease and sell real and personal property.

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

Name

Address

None

Dated September 29, 2000



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.

Foundry Parcel Fifteen Associates, LLC

Exact Name of Limited Liability Company

The Foundry Associates, L.P., its Member

By

Antonio Guerra

Managing General Partner

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 10/16/2000

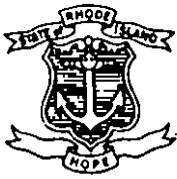
Check No: 10220

By: 10/22/2000

Form No. 632
Revised 01/99

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 96719

Annual Report for the year 1999

1. The name of the limited liability company is:

Foundry Parcel Fifteen Associates, LLC

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

235 Promenade Street, Providence, RI 02908

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: DAVID J. TRACY, ESQ.

MCGOVERN NOEL & BENIK, INC. ONE BANKBOSTON PLAZA 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: Antonio Guerra, c/o The Foundry Associates

235 Promenade Street, Providence, RI 02908

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: To acquire, develop, manage, improve, rent, lease and sell real and personal property.

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

Name

Address

None

Dated September 1, 1999



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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.

Foundry Parcel Fifteen Associates, LLC

The Foundry Associates, L.P., its Member

By Antonio Guerra
Antonio Guerra
Managing General Partner

Title

FOR SECRETARY OF STATE USE ONLY
File Date: SEP 1 1999

Check No.: SEP 29 1999

By: 96719

Form No. 632
Revised 01/99



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 96719

Annual Report for the year 1998

1. The name of the limited liability company is:

Foundry Parcel Fifteen Associates, LLC

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

235 Promenade Street, Providence, RI 02908

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: DAVID J. TRACY, ESQ.

MCGOVERN, NOEL & BENIK : One BankBoston Plaza, 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: Antonio Guerra, c/o The Foundry Associates

235 Promenade Street, Providence, RI 02908

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: To acquire, develop, manage, improve, rent, lease and sell real and personal property.

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

Name

Address

None

Dated November 24, 19 98

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.



* 9 6 7 1 9 *

FOR SECRETARY OF STATE USE ONLY
File Date: NOV 24 1998
Check No.: 14650
By: [Signature]

Foundry Parcel Fifteen Associates, LLC
Exact Name of Limited Liability Company

The Foundry Associates, L.P., its Member

By [Signature]
Antonio Guerra
Managing General Partner

Title