



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. 96619		2. Exact name of the limited liability company Mars Realty, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island RENTAL, REAL ESTATE, AND DEVELOPMENT	
5. Principal office address 45 CRICKETT Circle		City EAST GREENWICH	State R.I.
		Zip 02818	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name S. GERALD MARSOCCI		Contact Title	
Street Address 45 CRICKETT Circle		City EAST GREENWICH	State R.I.
		Zip 02818	
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	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 S. GERALD MARSOCCI		Address	
Address 95 CRICKETT CIRCLE		City EAST GREENWICH	Zip 02818-

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



File Date	9/6/05	*96619*
Check No.	2023	
By:	DA	
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 of Authorized Person Date 9/7/05
S. GERALD MARSOCCI
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 96619		2. Exact name of the limited liability company Mars Realty, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island RENTAL, REAL ESTATE, AND DEVELOPMENT			
5. Principal office address 95 CRICKETT CIR/1		City E. GREENWICH	State RI	Zip 02818	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name S. GERALD MARSOCCI		Contact Title MANAGER			
Street Address 95 CRICKETT CIR/1		City E. GREENWICH	State R.I	Zip 02818	
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 S. GERALD MARSOCCI		Address			
Address 45 HUNTING HOUSE LANE		City NORTH SCITUATE	Zip 02857	SEP 29 11 17 AM '04 RECEIVED STATE CORPORATIONS DIVISION	

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



FILED

File Date SEP 29 2004
Check No.
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]
Signature of Authorized Person Date
S. GERALD MARSOCCI
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

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. 96619	2. Exact name of the limited liability company Mars Realty, LLC		
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island RENTAL, REAL ESTATE, AND DEVELOPMENT	
5. Principal office address 45 HUNTING HOUSE LN		City N. Scituate	State RI
		Zip 02857	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name S. GERALD MARSOCCI		Contact Title MANAGER	
Street Address 45 HUNTING HOUSE LN		City N. Scituate	State RI
		Zip 02857	
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		City	
State		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 S. GERALD MARSOCCI		Address	
Address 45 HUNTING HOUSE LANE		City NORTH SCITUATE	Zip 02857

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



* 9 6 6 1 9 *

File Date 9/30/03
Check No. 1796
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.

9-903
[Signature]
Signature of Authorized Person Date
S. GERALD MARSOCCI
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. 96619		2. Exact name of the limited liability company Mars Realty, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island RENTAL, REAL ESTATE, AND DEVELOPMENT	
5. Principal office address 45 HUNTING HOUSE LANE		City N. Scituate	State RI
		Zip 02857	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name J GERALD MARSOCCHI		Contact Title MANAGER	
Street Address		City	State
			Zip
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 J GERALD MARSOCCHI		Manager Name CONSTANCE MARSOCCHI	
Street Address 45 HUNTING HOUSE LANE		Street Address 45 HUNTING HOUSE LANE	
City N. Scituate	State RI	City N. Scituate	State RI
Zip 02857		Zip 02857	
Manager Name DAVID G. MARSOCCHI		Manager Name	
Street Address 156 QUAKER LANE		Street Address	
City N. Scituate	State RI	City	State
Zip 02857			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 S. GERALD MARSOCCHI		Address	
Address 45 HUNTING HOUSE LANE		City NORTH SCITUATE	Zip 02857

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




File Date
9-16-02

Check No.
1689

By:
LMC

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 of Authorized Person

Date

S. GERALD MARSOCCHI

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 96619

Annual Report for the year 2001

1. The name of the limited liability company is:

Mars Realty, LLC

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

45 HUNTING HOUSE LANE N. SCITUATE RI 02857

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: S. GERALD MARSOCCI

45 HUNTING HOUSE LANE NORTH SCITUATE RI 02857

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: 45 HUNTING HOUSE LANE N. SCITUATE RI 02857

S. GERALD MARSOCCI, MANAGER

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

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

Name	Address
<u>S. GERALD MARSOCCI</u>	<u>45 HUNTING HOUSE LANE N. SCITUATE RI 02857</u>
<u>CONSTANCE MARSOCCI</u>	<u>45 HUNTING HOUSE LANE N. SCITUATE RI 02857</u>
<u>DAVID G. MARSOCCI</u>	<u>156 QUAKER LANE N. SCITUATE RI 02857</u>

Dated 8/29/01



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.

MARS REALTY LLC

Exact Name of Limited Liability Company

By [Signature]

Title

Form No. 632
Revised 01/99

FOR SECRETARY OF STATE USE ONLY
File Date: 8-30-01

Check No.: 1827

By: [Signature]

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

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 96619

Annual Report for the year 2000

1. The name of the limited liability company is:

Mars Realty, LLC

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

45 HUNTING HOUSE LANE N Scituate, R.I 02857

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: S. GERALD MARSOCCI

45 HUNTING HOUSE LANE NORTH SCITUATE RI 02857

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: 45 HUNTING HOUSE LANE N. Scituate RI 02857

S. GERALD MARSOCCI MANAGER

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

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

Name

Address

S. GERALD MARSOCCI
CONSTANCE MARSOCCI
DAVID G. MARSOCCI

45 HUNTING HOUSE LANE N. Scituate RI 02857
45 HUNTING HOUSE LANE N. Scituate RI 02857
156 QUAKER LANE N. Scituate RI 02857

Dated

9-12-00



9 6 6 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.

MARS Realty LLC

Exact Name of Limited Liability Company

By: [Signature]

Manager

Title

FOR SECRETARY OF STATE USE ONLY

File Date:

9/13

Check No.:

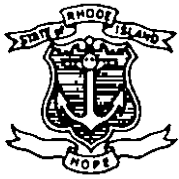
1485

By:

ac

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 96619

Annual Report for the year 1999

1. The name of the limited liability company is:

Mars Realty, LLC

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

45 HUNTING HOUSE LANE N. SCITUATE RI 02857

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: S. GERALD MARSOCCI

45 HUNTING HOUSE LANE NORTH SCITUATE, RI 02857

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: 45 HUNTING HOUSE LANE

N. SCITUATE, R.I. 02857

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: RENTAL + ACCOUNTS OF REAL ESTATE

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

Name

Address

S. GERALD MARSOCCI,
CONSTANCE MARSOCCI,
DAVID G. MARSOCCI,

45 HUNTING HOUSE LN N. SCITUATE RI 02857
" " " "
156 QUAKER LANE N. SCITUATE RI 02857

Dated 9-23-99



* 9 6 6 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.

MARS REALTY LLC

Exact Name of Limited Liability Company

By [Signature]
MANAGER

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 9-24-99

Check No.: 1464

By: AMF

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 96619

Annual Report for the year 1998

1. The name of the limited liability company is:

Mars Realty, LLC

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

45 HUNTING HOUSE LANE N. Scituate RI 02852

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: S. GERALD MARSOCCI

45 HUNTING HOUSE LANE NORTH SCITUATE, RI 02857

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: 45 HUNTING HOUSE LANE

NORTH SCITUATE RI 02857

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

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

Name

Address

S. GERALD MARSOCCI

45 HUNTING HOUSE LANE N. Scituate RI 02852

CONSTANCE MARSOCCI

456 HUNTING HOUSE LANE

DAVID G. MARSOCCI

156 QUAKER LANE N. Scituate RI 02852

Dated 8/28, 19 98



* 9 6 6 1 9 *

FOR SECRETARY OF STATE USE ONLY

File Date: 9-1-98

Check No.: 1305

By: 100

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.

MARS Realty LLC

Exact Name of Limited Liability Company

By: [Signature]

Title

Form No. LLC-19
Revised 8/97

DETACH BOTTOM BEFORE RETURNING