

Filing Period: September 1 - November 1

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 101.222.3040

#### LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR Filing Fee: \$50.00

2004

FORM MUST BE TYPED	OR PRINT	ED IN BIACK)					
1. ID No.		•	l liability company				<u>.                                      </u>
75519	Hope	Investments Li	mited Liability Comp	any		_	
3 State of Formation		4. Brief description	n of the character of the h	usiness which is actually conducted in	Rhode Island		
RHODE ISLAND		BUYING, SE	LLING & INVESTING	OF REAL ESTATE			
5. Principal office addres		<u> </u>		City	State	Zιp	<u> </u>
15 Circl				COST Provide		102	२/६
6. MAILING ADDRF	ess of L	IMITED LJABII	LITY COMPANY ANI	D NAME OR TITLE OF CONTA	ACT PERSON:		
Contact Name	•	,		Contact Title			
William	<u>^ Н</u>	urlay		V. Yves			
Since Address 15 Civele ST				Cast Province	ewca State	=   Zip O 2	916
		FILL IN SPA	ACES BEFORE USIN	ED LIABILITY COMPANY, IF A G ATTACHMENTS ("X" BOX IRES FILING OF AMENDMEN  Alanager Name	X FOR ATTACHMENT	•	
Street Address		<del></del>		Street Address			
City		State	Zip	City	State	Zip	
Manaper Trine		l	I	Manager Name		J	•
Street Address				Street Address			
City ,		State	Zir	Cüy	State	Zip	<del></del>
8. RESIDENT AGEN Agent Name	T IN RH	ODE ISLAND -	DO NOT ALTER - C	Changes require filing of Fo	rm 642 - R.I.G.L. 7-	16-11	
JANE M. ROY							
Address				City		Zip	
15 CIRCLE STREET				EAST PROVIDENCE		02915	
_				· · · · · · · · · · · · · · · · · · ·		1	

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

*		5		

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.

William F Houley



Office of the Secretary of State

Matthew A. Brown, Secretary of State

100 North Main Street Providence, RI 02903-1335 401.222,3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR \_

2003

1. H) No.	2. Exact name of 1	2. Exact name of the limited liability company					
75519		vestments Limited Liabilit	v Company				
3. State of Formati			the business which is actually conducted	d to Phodo Island			
-				u ou norsie isiiina			
RHODE ISLAN		NG, SELLING & INVEST	ING OF REAL ESTATE				
5. Principal office o			City	State	Z.lp		
	VE STREET		EXST PROVI	DENCE FIL	02916		
. MAILING AI	DDRESS OF LIMITED	LIABILITY COMPANY	AND NAME OR TITLE OF CO	NTACT PERSON:	1		
ontact Name			: Contact Title				
WIL-11	AM F. HURL RCLE STREE	<u>Ey</u>	VICE 17	RESIDENT  DENCE SUR			
Invet Address			Chy	State	20		
15 CI	PCLE STREE	T	EAST FROM	DENCE KI	02916		
NAME AND	ADDRESS OF EACH !	MANAGER OF THE LIN	HITED LIABILITY COMPANY, I		I		
	FILL	IN SPACES BEFORE U	SING ATTACHMENTS ("X" B	BOX FOR ATTACHMENTI	1		
	ANY MODIFICATIO	NS TO MANAGERS RE	QUIRES FILING OF AMENDMI	ENT, R.I.G.L. 7-16-12 (a) (2	- 2) / 7-16-52		
anaget Name			Manager Name	:			
reet Address							
			Street Address				
			Street Address				
ty .	State	Zıp	Street Address  City	State	700		
ty	State	Zıp		State	Zip		
••••••	State	Zıp		State	Zijo		
•	State	Zıp	City	State	Ζιρ		
anager Name	State	Zip	City	State	Zų		
lanager Name reet Address	State	Zıp	City Manager Name	State	Zip		
anager Name reet Address	State State	Z <sub>I</sub> p	City Manager Name	State State			
anager Name rvet Address	State	Zų	City  Manager Name  Sirvet Address  City	State	Zıp		
anager Name reet Address by  RESIDENT A	State	Zų	City  Manager Name  Sirvet Address  City  4 - Changes require filing of I	State	Zıp		
anager Name reet Address by  RESIDENT A	State	Zų	City  Manager Name  Sirvet Address  City	State	Zıp		
anager Name  reet Address  ty  RESIDENT A  gent Name	State	Zų	City  Manager Name  Sirvet Address  City  4 - Changes require filing of I	State	Zıp		
anager Name reet Address by  RESIDENT A gent Name	State	Zų	City  Manager Name  Sirvet Address  City  4 - Changes require filing of I	State Form 642 - R.I.G.I 7-16-13	Zip		
tanager Name treet Address try . RESIDENT A gent Name JANE M. ROY ddress 15 CIRCLE STRE	State GENT IN RHODE ISL	Zų	Cuy  Manager Name  Sirvet Address  City  Changes require filing of I	State Form 642 - R.I.G.L. 7-16-11	Zip		

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

	* 7 5 5 1 9 *
File Date _	9-16-03
Check No	804
Ву:	<u> </u>
FC	R SECRETARY OF STATE USE ONLY

Under penalty of including any acc	ompanying sch	edules and	m that I h statement	ave examine s, and that al	d this report. I statements,
contained herein	are true and cor	rect.			
		<del>.</del> /			
The	7.	huly	9/	11/03	
Signature of Autho	rized Person	7	Date	7	
11		,			

NILLIAM F. HURLEY Print or Type Name of Authorized Person

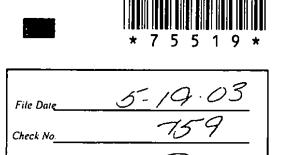


Edward S. Inman, 111, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

### 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) I. ID No. 2. Exact name of the limited liability company 75519 Hope Investments Limited Liability Company 3. State of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island **BUYING, SELLING & INVESTING OF REAL ESTATE** RHODE ISLAND 5. Principal office address EAST TROVIDENCE 02916 15 CIRCLE STREET 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: WILLIKH F. Zip 02916 IXCLE STREET 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 Munager Name • Manager Name Manager Name Manager Name Street Address ·Street Address 1.3 City .City Zip Zip State 8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11 Agent Name Address JANE M. ROY Address Zip 15 CIRCLE STREET **EAST PROVIDENCE** 02915

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



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.

# 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

#### A Ben 5

ID	Number DLLC 75519	Annual Report for the year 2001
1.	The name of the limited liability comp	pany is:
	Hope Investments Limited Liability C	Company
2.	The address of the principal office of	f the limited liability company is:
	15 Circle Street	t, East Providence, R. I. 02916
3.	The state or other jurisdiction under	the laws of which it is formed is RHODE ISLAND
4.	The name and address of its resider	nt agent is: JANE M. ROY
	15 CIRCLE STREET EAST PROVID	DENCE RI 02915
5.	The current mailing address of the li	imited liability company and the name or title of a person to whom communications
	may be directed are: 15 Circle	Street, E. Prov. R I. Jane M. Roy Bookkeeper
6.	stateRental Buying & Sel	of the business in which the limited liability company is actually engaged in this
7.	If the limited liability company has manual Name	activity lanagers, the name and address of each manager of the limited liability company  Address
Da	ated10/26/01	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.
	7 5 5 1 9	Hope Investments, LLC  Exact Name of Limited Liability Company
File	FOR SECRETARY OF STATE USE ONLY Date:	By Coullent Rule
Che	eck No.: 32209	President/CEO Title
3v:	سر آن	Form No. 632 Revised 01/99

# To be filed annually between September 1 and November 1

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

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By:

Annual Report for the year 2000

	<u> </u>	Allilual hepotrior die year 2000
1.	The name of the limited liability com	pany is:
	Hope Investments Limited Liability C	Company
2.	The address of the principal office of 15 Circle Street, East Pr	
3.	The state or other jurisdiction under	the laws of which it is formed is RHODE ISLAND
4.	The name and address of its resider	ntagentis: JANE M. ROY
	15 CIRCLE STREET EAST PROVI	DENCE RI 02915
5.	The current mailing address of the li	mited liability company and the name or title of a person to whom communications
	may be directed are: 15 Circle	e Street, East Providence, R. I. Jane M. Roy Bookkeeper
3.	<b>.</b>	of the business in which the limited liability company is actually engaged in this
<b>7</b> .	If the limited liability company has m Name	anagers, the name and address of each manager of the limited liability company Address
)at	10/31/00	Under penalty of perjury, I declare and affirm that I have examined this
	7 5 5 1 9	report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  Hope Investments, LLC  Exact Name of Limited Liability Company
ile i	OR SECRETARY OF STATE USE ONLY Date: ///2	President/CEO
пес	k No.: 694	Title

## 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 LI	ABILITY COMPANY		
ID	D Number <u>LL 75519</u>	Annual Report for the year 1999	_	
1.	The name of the limited liability company is:  Hope Investments Limited Liability Company			
2.		lity company is:		
3.	15 Circle Street, East Providence, R.  The state or other jurisdiction under the laws of which	•	OLT 216	
4.	The name and address of its resident agent is: JO A  15 CIRCLE STREET EAST PROVIDENCE, RI 029		W 33	100 M
5.	The current mailing address of the limited liability co may be directed are: 15 Circle Street, East Carol Ann Hurley		comm	nunications
6.	S. A brief statement of the character of the business state: Buying, selling and investing of			_
7.	<ol> <li>If the limited liability company has managers, the na Name</li> </ol>	me and address of each manager of the limited lia Address	ability o	company
Da	report,	penalty of perjury, I declare and affirm that I have including any accompanying schedules and statements contained herein are true and correct.  Hope Investments Limited Liability  Exact Name of Limited Liability Company	tatem	ents, and
File	0C1 5 P 1888		Form No	



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

ID	Number LL 75519	Annual Report for the year 1998
1.	The name of the limited liability company is	s:
	Hope Investments Limited Liability Compa	ny
2.	The address of the principal office of the lin	mited liability company is:
	15 Circle Street, East Prov	vidence, RI 02916
3.	The state or other jurisdiction under the law	ws of which it is formed is RHODE ISLAND
4.	The name and address of its resident ager	nt is: JO ANNE MEDEIROS
	15 CIRCLE STREET EAST PROVIDENCE	CE, RI 02915
5.	The current mailing address of the lin	nited liability company and the name or title of a person to whom
	communications may be directed are:1	5 Circle Street, East Providence, RI 02916
		Carol Ann Hurley
6.	A brief statement of the character of the	business in which the limited liability company is actually engaged in this
	state: Buying, selling and i	investing of real estate and other lawfully
7.	related activity If the limited liability company has manage Name	rs. the name and address of each manager of the limited liability company Address
Da	ted September 14 ,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.
	* 7 5 5 1 9 *	Hope Investments Limited LIability Company  Exact Name of Limited Liability Company
File	FOR SECRETARY OF STATE USE ONLY Date: 0 1/2 0	7
Che	ck No.: 27	By Carrans Huly
	110	Member
Ву:	V <b>∀</b>	Title

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

ID	Number	Annual Report for the year	1997			
1.	The name of the limited liability company is  Hope Investments Limited Liabil		·			
2.	The address of the principal office of the lin 15 Circle Street, East Providen	• • •				
	The state or other jurisdiction under the law	To Anne Medeiros				
4.	The name and address of its resident agen	tis:15 Circle Street, East Providence, RI	02916			
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:  Carol Ann Hurley					
6.	A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Buying, selling and investing of real estate and other lawfully related activity.					
7.	Name	agers, the name and address of each manager of the Address	e limited liability			
Da	PAID APR - 7 1998 SECRETARY OF STATE	Under penalty of perjury, I declare and affirm that I have report, including any accompanying schedules and that all statements contained herein are true and correct Hope Investments Limited Liability Company  Exact Name of Limited Liability Company  By  Member  Title	statements, and t.			

To be filed annually between September 1 and November 1

### State of Rhode Island and Providence Plantations

Office of the Secretary of State Corporation Division 100 North Main Street Providence, RI 02903-1335

### LIMITED LIABILITY COMPANY

LLC I.D.# 75519

Annual Report for the year 1996

FIRST:	The name of the limited liability company is: Hope Investments Limited Liability Company
SECOND:	The address of the principal office of the limited liability company is: 15-Gircle-Street;
	East Providence, RI 02916
THIRD:	The state or other jurisdiction under the laws of which it is formed is: Rhode Island
FOURTH:	The name and address of its resident agent is:
	William J. Conley, Jr., Esq. 670 Willett Avenue, East Providence, RI 02915
FIFTH:	The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:  15 Circle Street, East Providence, RI 02916  Carol Ann Hurley, Pres.
SIXTH:	A brief statement of the character of the business in which the corporation is actually engaged in this state:  Buying, selling, and investing of real estate and other lawfully  related activity.
Dated	Oct. 16 19 96 HOPE INVESTMENTS LIMITED LIABILITY COMPANY
	Exact Name of Limited Liability Company
File Date: Check No: By:	*By Acol And Sucley *To be signed in the manner required by the home state.
For Secret	tary of State Use Only Title Quality

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#### State of Rhode Island and Providence Plantations

Office of the Secretary of State Corporation Division 100 North Main Street Providence, RI 02903-1335

LLC I.D. #	075519	Annual Report for the year1995	
FIRST:	The name of the limited liability company is:  Hope Investments Limited Liability Company		
SECOND:	The address of the principal office of the limited liability company is:  15 Circle Street, East Providence, RI 02916		
THIRD:	The state or other jurisdiction under the laws of which it is formed is:  Rhode Island		
FOURTH:	The name and address of its resident agent is: William J. Conley, Jr., Esq.  670 Willett Ave., E. Providence, RI 02915		
FIFTH:	FIFTH: The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:  15 Circle Street, East Providence, RI 02915  Attn: Carol Ann Hurley, Pres.		
SIXTH:	A brief statement of the character of the business in which the corporation is actually engaged in this state:  Buying, selling and investing of real estate and other  lawfully related activity.		
Dated	L // 19 96	HOPE INVESTMENTS LIMITED LIABILITY COMPANY  Exact Name of Limited Liability Company	
	SEP 1.5 1995 By CC 133	*By Court asin Scelly.  Title Member	

<sup>\*</sup>To be signed in the manner required by the home state.