



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. 129720		2. Exact name of the limited liability company T O Sweeney Appraisal Company, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE APPRAISAL			
5. Principal office address 73 Pine Street		City Providence	State RI	Zip 02903	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Thomas O. Sweeney			Contact Title		
Street Address 73 Pine Street		City Providence	State RI	Zip 02902	
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 NADEAU & SIMMONS, P.C.			Address		
Address 56 PINE STREET		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 11-08-05 *129720*

Check No. 1456

By: TOP

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.

TOP 11-6-05
 Signature of Authorized Person Date
Thomas O. Sweeney
 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

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1. ID No 129720		2. Exact name of the limited liability company T O Sweeney Appraisal Company, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island Real Estate Appraisal	
5. Principal office address 72 Pine Street		City Providence	State RI
		Zip 02903	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Thomas O. Sweeney		Contact Title	
Street Address 72 Pine Street		City Providence	State RI
		Zip 02903	
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Agent Name NADEAU & SIMMONS, P.C.		Address 56 PINE STREET	
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This report must be signed in ink by an authorized person pursuant to 7-16-66.



1 2 9 7 2 0

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.

 10-21-04
Signature of Authorized Person Date
Thomas O. Sweeney
Print or type Name of Authorized Person

129720 DLLC 09/29/04 11:52:44 AM

File Date 10/22/04

Check No. 1243

By: TS

FOR SECRETARY OF STATE USE ONLY