



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 96621		2. Exact name of the limited liability company Agnes Street, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island INVESTMENT OPPORTUNITIES.			
5. Principal office address c/o Plourde, Bogue & Moylan, LLP 50 Exchange Terrace, Suite 320		City Providence		State RI	Zip 02903
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Joseph P. Cuddigan			Contact Title Operating Manager		
Street Address 35 Agnes Street		City East Providence		State RI	Zip 02914
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 Joseph P. Cuddigan			Manager Name		
Street Address 35 Agnes Street		Street Address			
City East Providence	State RI	Zip 02914	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 RICHARD A. BOGUE, ESQ.			Address		
Address 50 EXCHANGE TERRACE, SUITE 320		City PROVIDENCE		Zip 02903	

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



96621

File Date	10/26/05
Check No.	1960
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.

Signature of Authorized Person
Joseph P. Cuddigan, Operating Manager
10/24/05
Date
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
160 North Main Street
Providence, RI 02903-1335
401 222 3046

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. 96621		2. Exact name of the limited liability company: Agnes Street, LLC	
3. State of formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island INVESTMENT OPPORTUNITIES.	
5. Principal office address 35 Agnes Street		City East Providence	State RI
		Zip 02914	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Joseph P. Cuddigan		Contact Title Operating Manager	
Street Address 35 Agnes Street		City East Providence	State RI
		Zip 02914	
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 Joseph P. Cuddigan		Manager Name	
Street Address 35 Agnes Street		Street Address	
City East Providence	State RI	City	State
Zip 02914		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 RICHARD A. ROGUE, ESQ.		Address PLOURDE, ROGUE, MCLAUGHLIN	
Address 50 EXCHANGE TERRACE, 3RD FLOOR		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 6 2 1 *

File Date	10/18/04
Check No.	1811
By	U.
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 **10/13/04**
Joseph P. Cuddigan, Operating Manager
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 3030

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 96621		2. Exact name of the limited liability company Agnes Street, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island INVESTMENT OPPORTUNITIES.			
5. Principal office address 35 Agnes Street		City East Providence		State RI	Zip 02914
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name: Joseph P. Cuddigan Contact Title: Operating Manager					
Street Address 35 Agnes Street		City East Providence		State RI	Zip 02914
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 Joseph P. Cuddigan		Manager Name			
Street Address 35 Agnes Street		Street Address			
City East Providence	State RI	Zip 02914	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 RICHARD A. BOGUE, ESQ.			Address PLOURDE, BOGUE, MCLAUGHLIN		
Address 50 EXCHANGE TERRACE, 3RD FLOOR			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	10/27/03
Check No	1662
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.

Signature of Authorized Person Date **10/17/03**
Joseph P. Cuddigan, Operating Manager
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. 96621		2. Exact name of the limited liability company Agnes Street, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island INVESTMENT OPPORTUNITIES.	
5. Principal office address 50 Exchange Terrace, Suite 320		City Providence	State RI
		Zip 02903	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Joseph P. Cuddigan		Contact Title Operating Manager	
Street Address 35 Agnes Street		City East Providence	State RI
		Zip 02903	
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 Joseph P. Cuddigan		Manager Name	
Street Address 35 Agnes Street		Street Address	
City East Providence	State RI	City	State
	Zip 02914		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 RICHARD A. BOGUE, ESQ.		Address PLOURDE, BOGUE, MCLAUGHLIN	
Address 50 EXCHANGE TERRACE, 3RD FLOOR		City PROVIDENCE	Zip 02903

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




10-11-02

1529

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.



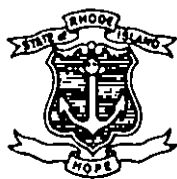
9/30/12

Joseph P. Cuddigan, Operating Manager

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 96621

Annual Report for the year 2001

1. The name of the limited liability company is:

Agnes Street, LLC

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

35 Agnes Street, East Providence, RI 02914

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: RICHARD A. BOGUE, ESQ.

PLOURDE, BOGUE, MCLAUGHLIN 50 EXCHANGE TERRACE, 3RD FLOOR 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: Joseph P. Cuddigan, Operating Manager

35 Agnes Street, East Providence, RI 02914

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

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

Name

Address

Joseph P. Cuddigan

35 Agnes Street, East Providence, RI 02914

Operating Manager

William J. Cuddigan

same

Vice-Operating Manager

2001

Dated

10/23

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 6 2 1

Agnes Street, LLC

Exact Name of Limited Liability Company

By

[Signature]
Operating Manager

Title

Form No. 632
Revised 01/99

FOR SECRETARY OF STATE USE ONLY

File Date:

10-25-01

Check No.:

1410

By:

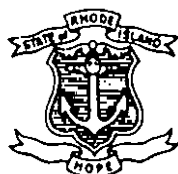
[Signature]

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 96621

Annual Report for the year 2000

1. The name of the limited liability company is:

Agnes Street, LLC

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

35 Agnes Street, East Providence, RI 02914

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: RICHARD A. BOGUE, ESQ.

Plourde, Bogue, McLaughlin&Moylan, LLP 50 Exchange Terrace, 3rd Floor, 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: Joseph P. Cuddigan, Operating Manager

35 Agnes Street, East Providence, RI 02914

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

- [illegible]

Joseph P. Cuddigan, Operating Manager 35 Agnes Street, East Prov., RI 02914

Dated Nov. 16, 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.



Agnes Street, LLC

Exact Name of Limited Liability Company

NOV 22 2000

FOR SECRETARY OF STATE USE ONLY

File Date:

Check No.:

By:

By

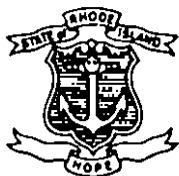
Operating Manager

Tide

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 96621

Annual Report for the year 1999

1. The name of the limited liability company is:

Agnes Street, LLC

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

35 Agnes Street, East Providence, Rhode Island

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: RICHARD A. BOGUE, ESQ.

ONE CITIZENS PLAZA, SUITE 830 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: Joseph P. Cuddigan, Operating Manager

35 Agnes Street, East Providence, RI

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

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

Name

Address

Joseph P. Cuddigan

35 Agnes Street, East Providence, Rhode Island

Operating Manager

Dated _____



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.

Agnes Street, LLC

Exact Name of Limited Liability Company

By

Operating Manager

Title

FOR SECRETARY OF STATE USE ONLY

File Date:

Check No.:

By:

PAID
OCT 27 1999
SEC'Y OF STATE

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 96621

Annual Report for the year 1998

1. The name of the limited liability company is:

Agnes Street, LLC

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

35 Agnes Street, East Providence, Rhode Island

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: RICHARD A. BOGUE, ESQ.

ONE CITIZENS PLAZA, SUITE 830 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: Joseph P. Cuddigan, Operating Manager

35 Agnes Street, East Providence, Rhode Island

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

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

Name

Address

Joseph P. Cuddigan

35 Agnes Street, East Providence, Rhode Island

Operating Manager

Dated October 23, 1998



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.

Agnes Street, LLC

Exact Name of Limited Liability Company

By

Joseph P. Cuddigan
Operating Manager

Title

FOR SECRETARY OF STATE USE ONLY

File Date:

10.30.98

Check No.:

1086

By:

UP

Form No. LLC-19
Revised 8/97

DETACH BOTTOM BEFORE RETURNING