

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. 2. Exact name of the limited liability company 102922 **RDW REALTY, LLC** 3. State of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE RHODE ISLAND State 5. Principal office address 02908-PROVIDENCE RI 125 HOLDEN STREET 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Title Contact Name .CO-MANAGER MICHAEL M DOYLE Sireei Address City State Zip . PROVIDENCE 02908-RI 125 HOLDEN 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 Manager Name · Manager Name THOMAS E WALSH MICHAEL M DOYLE · Street Address Street Address 125 HOLDEN STREET 125 HOLDEN STREET Zip State State Zip City City PROVIDENCE 02908 RI 02908 PROVIDENCE RI Manager Name Manager Name NONE NONE Street Address Street Address City Zφ State Cin Zio

Address

PROVIDENCE

City

8. RESIDENT AGENT IN RHODE ISLAND DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11

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



102922 DLLC 09/08/05 11:34:57 AM				
File Date	9/22	07_		
Check No	1000°	Mynnog		
B_{Y}	Kw	\ L		
FOR SECRE	TARY OF STATE	USE ONLY		

Agent Name

Address

ADLER POLLOCK & SHEEHAN P.C.

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.

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02903-

Signature of Authorized Person

MICHAEL M DOYLE

ONE CITIZENS PLAZA, 8TH FLOOR

FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

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Filing Period: Septe			Filing Fee: \$50.00			
1. ID No. 102922						
3. State of Formation	<u> </u>	4. Brief description of t	he character of the busine	ess which is actually conducte	ed in Rhode Island	
RHODE ISLAND		REAL ESTATE				
5. Principal office address 125 HOLDEN ST			-	Cin- PROVIDENCE	Siate RI	<i>Zip</i> 02908-
6. MAILING ADDI Contact Name MICHAEL M DOY		OF LIMITED LIAB	ILITY COMPANY A	Contact Title CO-MANAGER	E OF CONTACT PI	ERSON:
Street Address 125 HOLDEN STI	REET			City PROVIDENCE	State RI	Zip 02908-
	DRESS	FILL IN SPACES	BEFORE USING ATT.	TED LIABILITY CON ACHMENTS ("X" BOX	 MPANY, 1F APPLI((<i>FOR ATTACHMENT</i>)	CABLE .
17 W	ANY M	ODIFICATIONS TO MA	ANAGERS REQUIRES	FILING OF AMENDMENT.	. R.I.G.L 7-16-12 (a) (2) / 7-16-52
Manager Nume MICHAEL M DOY	T E			• Munager Name • THOMAS E WALS	บ	
Sircei Address	ne .			*Street Address	п	
125 HOLDEN ST	REET			.125 HOLDEN ST	REET	
City		State	Zip	*Ciny	State	Zip
PROVIDENCE		RI	02908	PROVIDENCE	RI	02908
Manager Name PHILIP R RIVE	ERS			*Manager Name NONE		
Street Address				·Sircei Address	<u></u>	
125 HOLDEN ST	CREET			· 		
City		State	Zip	.City	State	Zip
PROVIDENCE 8. RESIDENT AGEN	NT IN R	RI HODE ISLAND <i>-DO</i>	02908 NOT ALTER- Chang	es require filing of	 Form 642 - R.I.G.L.	 .7-16-11
Agent Name			_	Address		
ADLER POLLOC	K & SH	IEEHAN P.C		2300 FINANCIA	L PLAZA	
Address				Cir		Lip
				PROVIDENCE		02903-
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This report must be	e signed	tin ink by an autl	norized person purs	uant to 7-16-66.	0V 18 2004	<u>0</u>
				•	5 6315	_
	107	2 9 2 2				affirm that I have examined g schedules and statements,
102922 DLLC 0	9/28/04	. 02·27·44 PM	7		nents contained harein	
File Date			1.	1/1/	//	
				/// <u>///</u>	11 12	ulchou
Check No. Signature of Authorized Person Date				Date		

MICHAEL M DOYLE Print or Type Name of Authorized Person



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 2003 Filing Period: September 1 - November 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 2. Exact name of the limited liabilty company 102922 RDW REALTY, LLC 4. Brief description of the character of the business which is actually conducted in Rhode Island 3. State of Formation REAL ESTATE RHODE ISLAND State Cirv 5. Principal office address Zip PROVIDENCE RΙ 02908-125 HOLDEN STREET 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Title Contact Name MICHAEL M DOYLE City State Street Address Zip . PROVIDENCE RI 125 HOLDEN STREET 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 Manager Name Thomas E. Walsh MICHAEL M DOYLE · Street Address Street Address 125 HOLDEN STREET .125 HOLDEN STREET State Zip •Cin City State Zip 02908 PROVIDENCE RΙ 02908 PROVIDENCE Manager Name Manager Name Philip R. Rivers ·Street Address Street Address 125 HOLDEN STREET State Zip City State Zip 02908 **PROVIDENCE** RI 8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11 lgent Name JOSEPH DEANGELIS, ESQ. 10 WEYBOSSET STREET, 10TH FLOOR City Address Zip **PROVIDENCE** 02903-

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



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File Date	4-12-03		
Check No.	23495		
Ву:	2.		
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 off statements contained herein are true and correct.

Signature of Authorized Pelson Michael M. Doyle

Print or Type Name of Authorized Person

Form 632 Rev. 6/02

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) 2. Exact name of the limited liability company I. ID No. 102922 **RDW REALTY, LLC** 4. Brief description of the character of the business which is actually conducted in Khode Island 3. State of Formation **REAL ESTATE RHODE ISLAND** State 5. Principal office address 02908 125 Holden Street Providence, RI6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Title Contact Name Michael M. Doyle Manager Street Address City 125 Holden Street Providence 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 Nume Manager Name Thomas E. Walsh Michael M. Doyle Street Address Street Address 125 Holden Street 125 Holden Street State Zip State . RI .02908. , RI 02908 Providence Providence Manager Name lanager Name Philip R. Rivers Street Address 125 Holden Street ·Street Address City State Cin State Zip Providence 02908 RI8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11 Agent Name Address DAVID H. FERRARA, ESQ. 21 GARDEN CITY DRIVE Zip City Address

CRANSTON

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



P.O. BOX 20130

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.

02920

File Date FILED

Check No. SFP 0 9 2002

By: By Abb 8

FOR SECRETARY OF STATE USE ONLY

70. He on E 195	true and	9/5/02
Signature of Authorized Person	Date	

Michaelt Mil Doyle, Manager

(Million Type Name of Authorized Person

Filing Fee: \$50.00

By:

To be filed annually between September 1 and November 1

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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 DLLC 102922	Annual Report for the year 2001		
The name of the limited liability company is:				
	RDW REALTY, LLC			
2.	The address of the principal office of the	e limited liability company is:		
	125 Holden Street, Provid	lence, 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 a	gent is: DAVID H. FERRARA, ESQ.		
	21 GARDEN CITY DRIVE P.O. BOX 20			
5.	The current mailing address of the limit	ed liability company and the name or title of a person to whom communications		
	•	Doyle, Manager, 125 Holden Street,		
Providence, RI 02908				
6		the business in which the limited liability company is actually engaged in this		
0.	state: Real Estate	the business in which the limited hability company is actually origogod in this		
7.	7. If the limited liability company has managers, the name and address of each manager of the limited liability Name Address			
	Michael M. Doyle	125 Holden St., Providence, RI 02908		
	Thomas E. Walsh	125 Holden St., Providence, RI 02908		
	Philip R. Rivers	125 Holden St., Providence, RI 02908		
Da	ated1 0 2 9 2 2	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. RDW REALTY, LLC Exact Name of Limited Liability Company		
	FOR SECRETARY OF STATE USE ONLY e Date: /O-/2-O/	By Michael M. Doyle, Manager		
Check No.: /3562		Title Form No. 632		

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

ID	Number	DLLC	102922
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By:

Annual Report for the year 2000

	Maniper Deco rozocz					
1.	The name of the limited liability company is:					
	RDW REALTY, LLC					
2.	The address of the principal office of the	the limited liability company is:				
	125 Holden Street, Pro	ovidence, RI 02908				
3.	The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND					
4.	-	agentis: DAVID H. FERRARA, ESQ.				
	21 GARDEN CITY DRIVE P.O. BOX	20130 CRANSTON RI 02920				
5.		nited liability company and the name or title of a person to whom communications				
.	-	Doyle, Manager, 125 Holden Street,				
	Providence, RI 02908					
	A brief statement of the character of the business in which the limited liability company is actually engaged in this state: real estate If the limited liability company has managers, the name and address of each manager of the limited liability company Name Address					
	Michael M. Doyle	125 Holden St., Providence, RI 02908				
	Thomas E. Walsh	125 Holden St., Providence, RI 02908				
	Philip R. Rivers	125 Holden St., Providence, RI 02908				
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. RDW REALTY, I.I.C Exact Name of Limited Liability Company By Man						
	771	Michael M. Doyle, Manager				
Cne	eck No.: (de 19	Title Form No. 632				

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 N	lumber <u>LL 102922</u>	Annual Report for the year 1999			
1.	The name of the limited liability compar	ny is:			
F	RDW REALTY, LLC				
	The address of the principal office of the limited liability company is: 125 Holden Street, Providence, RI 02908				
3. ⁻	The state or other jurisdiction under the	e laws of which it is formed is RHODE ISLAND			
4.	The name and address of its resident a	agent is: DAVID H. FERRARA, ESQ.			
:	21 GARDEN CITY DRIVE P.O. BOX 20	0130 CRANSTON, RI 02920			
	-	Doyle, Manager, 125 Holden Street, Providence, RI 02908			
	A brief statement of the character of state: real estate	the business in which the limited liability company is actually engaged in this			
7	If the limited liability company has man Name	agers, the name and address of each manager of the limited liability company Address			
	Michael M. Doyle	125 Holden St., Providence, RI 02908			
	Thomas E. Walsh	125 Holden St., Providence, RI 02908			
	Philip R. Rivers	125 Holden St., Providence, RI 02908			
Date	ed December 9, 1999	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and			
	* 1 0 2 9 2 2 *	RDW REALTY, LLC Exact Name of Limited Liability Company			
	OR SECRETARY OF STATE USE ONLY Date: /-5-00	Michael M. Doyle, Manager			
Chec	k No.: 48/26	Title Form No. 632			
Bv∙	AMF	Revised 01/99			