



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. 132922		2. Exact name of the limited liability company APPONAUG CORNERS, 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			
5. Principal office address 2050 Plainfield Pike		City Cranston	State RI	Zip 02921	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Mario Coletta			Contact Title President		
Street Address 2050 Plainfield Pike		City Cranston	State RI	Zip 02921	
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 REVENS, REVENS & ST. PIERRE			Address		
Address 946 CENTERVILLE ROAD		City WARWICK	Zip 02886		

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



132922

File Date	10-18-05
Check No.	5060
By:	100
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.

Mario Coletta **9/29/05**
Signature of Authorized Person Date

Mario Coletta

Print or Type Name of Authorized Person



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1. ID No. 132922		2. Exact name of the limited liability company APPOAUG CORNERS, 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			
5. Principal office address 2050 Plainfield Pike		City Cranston		State RI	Zip 02921
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Mario Coletta			Contact Title President		
Street Address 2050 Plainfield Pike		City Cranston		State RI	Zip 02921
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Address 946 CENTERVILLE ROAD			City WARWICK		Zip 02886

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



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File Date	<u>11/16/04</u>
Check No.	<u>468</u>
By:	<u>W.</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.

Mario Coletta 11/16/04
Signature of Authorized Person Date

MARIO COLETTA

Print or Type Name of Authorized Person