

## 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

2005

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

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 PETTIS REALTY, LLC. 131529 f. Brief description of the character of the business which is actually conducted in Rhode Island TO BUY, SELL AND MANAGE REAL ESTATE AND ANY RELATED ACTIVITY 3 State of Formation RHODE ISLAND 5 Principal office address 25 Pettis Drive Warwick 02889 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Title Joseph State Sirret Address City 02886 Pettis Drive Warwick 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 Sirrei Address Street Address Manager Name Manager Name Street Address Street Address Z.ip City State Ζip 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11 Address Agent Name STEPHEN H. PENZA, CPA Zip Address City **CRANSTON** 1150 NEW LONDON AVENUE 02920-

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

	<u> </u>		
File Date	9/14/05	<b>*131529*</b>	
Check No	2179	M7400	ماد
Ву:	t m	<u></u>	.
FC	OR SECRETARY OF STA	TE USE ONLY	

	and affirm that I have examined this reportules and statements, and that all statements
\contained herein are true and correct	et.
	8 8065
Signature of Authorized Person Jones	Date Doyce
Print or Type Name of Authorized Pe	rson



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 2004

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. s 131529 Pettis Realty, LLC 4. Brief description of the character of the business which is actually conducted in Rhode Island 3. State of Formation To buy, sell and manage real estate and any related activities Vale Zip 5. Principal office address RI 02889 Warwick 25 Pettis Drive 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Title Contact Name Joseph A. Joyce State City Street Address 15 Pettis Drive RI 02920 .Cranston 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 Street Address Street Address Zip State Cirv State Zip City Monager Name Monager Name Street Address Street Address Ciry State State City Zip 8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.GL. 7-16-11 Äddress Agent Name Stephen H. Penza, CPA Zip Address Cranston, RI 02920 fg 1150 New London Avenue

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

	FILED
File Date	JUL 14 2005 / 87
8 <u>v.</u>	3y
FOR SECRE	TARY 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

Dote

Print of Inc. No. 18 Wheelers Person

Form 632 Rev. 6/02