

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: Septe			Filing Fee: \$50.00	E REI ORI I			
(FORM MUST BE TYPE			A 11.				
75130	. ID No. 2. Exact name of the limited liabilty company 75130 SHORT POINT REALTY LLC						
3. State of Formation	L			which is actually conducted	d in Rhode Island	_	
RHODE ISLAND	i	REAL ESTATE MA	-	, , , , , , , , , , , , , , , , , , , ,			
5. Principal office addre	:ss			City	State		Zip
24 CLINTON AV	ENUE			JAMESTOWN	RI		02835
6. MAILING ADDI	RESS O	F LIMITED LIAB	ILITY COMPANY AN	D NAME OR TITLE	OF CONTACT P	ERSON:	···-
Contact Name				Contact Title	-·		• 1
JAMES L WRIGH	r			•			
Street Address				City	State		Zip
24 CLINTON AVE	ENUE			. JAMESTOWN	RI		02835-
7. NAME AND ADI	DRESS (ED LIABILITY COM	IPANY, IF APPLI	CABLE	
			BEFORE USING ATTAC		FOR ATTACHMENT)		
	ANY MC	DDIFICATIONS TO MA	NAGERS REQUIRES FI	LING OF AMENDMENT.	R.I.G.L 7-16-12 (a) (2) / 7-16-52	
Manager Name				• Manager Name			
James Wright				Thomas F. Wrig	ht		
Street Address				*Street Address	·		
24 Clinton Ave	enue			.9 Tilley Avenu	ie, #2		
Ciry		State	Zip	*City	State		Zip
Jamestown		RI	02835	Newport	RI		02840
Manager Name	••••			Manager Name	• • • • • • • • •	• • • • •	
Street Address	_			Sireet Address			
City		State	Zip	City	State		Zip
•			- ,	•	0.00		'
8. RESIDENT AGEN	T IN RE	IODE ISLAND DO	NOT ALTER- Change:	require filing of F	orm 642 - R.I.GI.	7-16-11	
JAMES L. WRIGH	łΤ			24 CLINTON AVE	NUE		
Address				Ciny		Zip	
				1			
				UANESTONN		02835	
This report must be	signed	in ink by an auth	orized person pursua	nt to 7-16-66.			
75120 DI L C 00/	5 1	3 0	1	this report, including	erjury, I declare and ng any accompanyin ents contained herein	g schedules a	ind statements,
75130 DLLC 09/01/05 01:03:34 PM File Date File Date					05		
Check No.	<u> </u>	7		Signature of Authoriz	ed Person	Date	7
B_{Y} A	<u> </u>	er over		Print or Type Name	S C. Wrigh of Authorized Person	<u> </u>	
FOR SECREDARY OF	STATE U	SE UNLY					Form 632 Rev. 6/02



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 2004

Filing Period: Septe (FORM MUST BE TYP)		•	**	2.00		
1. ID No. 75130	2. Exac	i name of the limited RT POINT REAL	liabiliy company			
3. State of Formation						
RHODE ISLAND		REAL ESTATE	MANAGEMENT.			
5. Principal office addn	P.S.S	<u>.</u>		City	State	Zip
24 Clinton Av	enue			JAMESTOWN	RI	02835
6. MAILING ADD Contact Name JAMES L. WRIG		OF LIMITED LIA	ABILITY COMPA	NY AND NAME OR TITLE Contact Title	OF CONTACT PER	SON:
Street Address				City	State	Zip
24 CLINTON AVI				. JAMESTOWN	RI	02835
7. NAME AND AD	DRESS	OF EACH MAN	AGER OF THE L	IMITED LIABILITY COM	·	BLE
	ANY M		ES BEFORE USING	ATTACHMENTS ("X" BOX F RES FILING OF AMENDMENT. F	OR ATTACHMENT)	7 46 53
Manager Name	7001 m	obii ioriioiis io	mundens requi	* Manager Name	CLG.L 7-16-12 (8) (2) /	/-T6-5Z
JAMES WRIGHT				THOMAS F. WRIG	ит	
Street Address	·			Street Address		
24 CLINTON AV	ENUE			.9 TILLEY AVENU	E. #2	
City		State	Zip	*City	State	Zip
JAMESTOWN		RI	02835	NEWPORT	RI	02840
Manager Name				Manager Name		
Street Address				Sircet Address		
				* Sireel Mouress		
Ciry		State	Zip	City	State	Zip
DANIEL H. WRIG				anges require filing of Fe Address 206 NARRAGANSE		-·· ··
Address				City	Zip	जि.त
				JAMESTOWN	o:	2835-
This report must be	signed	in ink by an au	thorized person p	U rsuant to 7-16-66.	FILED FEB 17 2005 Kunc M 58062	17 Filiz: 22
7	5 1	3 0		Under penalty of per	jury, I declare and affire	n that I have examined
75130 DLLC 02/1	14/05 0	8:55:23 PM	7	this report, including	any accompanying sch ts contained herein are t	edules and statements.
File Date			1	1.	_	_
Check No				Signardre of Authorities	Person	Date 1 2005
B _{V;}			1	- Y-Times 1	. wint	
FOR SECRETARY OF S	TATE U	SE ONLY	1	Print or Type Name of	Authorized Person	<u> </u>
OPENDIANI OF 3		DE UNLT				Form 432 B (102



Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, R1 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) 1. ID No. 2. Exact name of the limited liabilty company SHORT POINT REALTY 0075130 LLC 3. State of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island RHODE ISLAND REAL ESTATE MANAGEMENT 5. Principal office address State 21 JAMETTONH 01935 206 NARRAGIANSETT AVENUE 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title JOHN RODMAN WRIGHT MANAGER City Street Address State DAMIEN ROAD 02481 57 · WELLESLEY MA 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 JOHN RODMAN WELFHI DANIEL W. WRIGHT Street Address Street Address 57 206 Avenus NARRAGANSETT DAMIEN City State Ciry_ State Zip Joinesson MELLERUE Manager Name Manager Name Street Address Smeet Address State City State Ζp 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 Address H. WRIGHT EDWARDS & ANGELL 2,800 FINANCIAL PLAZA DANIEL Address City 02903 P20VIDENCE fg

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

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements,
File Date RECEIVED	and that all statements contained herein are true and correct. 3/8/04
Check No. MAR 1 2 2004	Signature of Muthorized Person Date ./
FOR SECRETARY OF STATE USE ONLY	Print of Type Name of Authorized Person Form 632 Rev. 6/02



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

401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

I. ID No.		9			
0075130	2. Exact name of the limite	d liability company	AT POINT REA	LTV 11	. C.
. State of Formation	4. Brief description		ess which is actually conducted in		
RHODE ISLAN	P REAL	ESTATE MAN	AGEMENT	•	
Principal office addres	*. *		City	State P. 1	02835
	GANSETT . AVEN		JAMESTOWN.		
ontact Name		ABILITY COMPANY A	Contact Title	F CONTACT PI	ERSON:
	MAN WEIGHT		MANAGER		
reel Address 57 DAMIT	EN ROAD		. Hewester	State MA	O 2481
NAME AND ADD			TED LIABILITY COMPA	•	_
<u>.</u>			ACHMENTS ("X" ROX FOI FILING OF AMENDMENT, R.I.	<u> </u>	_
anager Name			· Manager Name		
JOHN RODA	han Wright		: DANI	EL H. WA	LIGHT
reet Address 57 DAMIE	N ROAD		Street Address		- Aug
DY DAMIE	State	Zip	: 206 NAR	State	
VELLESLEY	MA	OSABI	: JAMESTONN,	State 121	O2835
anager Name			Manager Name		
reet Address		•	Street Address	 .	
ity	State	Zip	City	State	Zip
			•		
	T IN RHODE ISLAND	DO NOT ALTER- Chang	es require filing of For	m 642 - R.I.G.L.	7-16-11
eni ivume			1,,00,00		
	. WRIGHT . EDE	NALDS & ANGELL	2800 FINAN	CIAL PLA-	ZA
DANIEL H	. WRIGHT, EDE	NALPS & ANGELL	2800 FINAN	CIAL PLA-	Zip
DANIEL H	. WRIGHT, EDE	NALPS & ANGELL		-	ZA Zip C2903
DANIEL H		warps & Angell authorized person purs	PROVIDENCE,	-	C2903
ddress Eg			PROVIDENCE, 1	2-1	C2903
DANIEL H ddress Eg This report must be File Date 3.11			Under penalty of perjuthis report, including and that all systements	2-1 ary, I declare and a any accompanying	orm that I have examined schedules and statements, are true and correct.
DANIEL H ddress Eg this report must be			Under penalty of perjuthis report, including a	ary, I declare and a any accompanying contained herein	ffirm that I have examined schedules and statements, are true and correct.

Filing Fee: \$50.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

	LIM	HED LIABILITY COMPANY
ID	Number <u>75130</u>	Annual Report for the year 2001
1.	The name of the limited liability company in Short Point Realty LLC	is:
2.	The address of the principal office of the li	
3.	The state or other jurisdiction under the law	ws of which it is formed is: Rhode Island
4.		ntis: <u>Daniel H. Wright, Esq.</u>
	206 Narragansett Avenue,	Jamestown, RI 02835
5.	The current mailing address of the lin	nited liability company and the name or title of a person to whom
	communications may be directed are:	J. Rodman Wright
	88 Draper Road, Wayland,	
6.	A brief statement of the character of the	business in which the limited liability company is actually engaged in this
-	state: Real Estate Managem	
7.	If the limited liability company has man	agers, the name and address of each manager of the limited liability
	company Name	Address
	J. Rodman Wright	88 Draper Road
		Wayland, MA 01778
Da	9.4-01 Ch#1049	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. Short Point Realty LLC Exact Name of Limited Liability Company By Rodman Wright Manager
		J. Rodman Wright, Manager Title

Filing Fee: \$50.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

ID	Number75130	Annual Report for the year 2000					
1.	The name of the limited liability company is	:					
	Short Point Realty LLC						
2.	. The address of the principal office of the limited liability company is:						
	88 Draper Road, Wayland, M	A 01778					
3.	The state or other jurisdiction under the laws	s of which it is formed is: Rhode Island					
4.	The name and address of its resident agent	is: Daniel H. Wright, Esq.					
	206 Narragansett Ave., Jam	estown, RI 02835					
5.	The current mailing address of the limit	ited liability company and the name or title of a person to whom					
	communications may be directed are:	J. Rodman Wright					
	88 Draper Road, Wayland, M	A 01778					
6.	A brief statement of the character of the b	usiness in which the limited liability company is actually engaged in this					
	state: Real Estate Managemen	t					
7.	If the limited liability company has manage	gers, the name and address of each manager of the limited liability					
	company Name	Address					
	J. Rodman Wright	88 Draper Road					
		Wayland, MA 01778					
Da	ted <u>S-31-01</u> , 190	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.					
	9.4.01	SHORT POINT REALTY LLC Exact Name of Limited Liability Company					
	C R# 1049,	By J. Rodman Wright, Manager					
	de	Title J-31-01					

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

	FIM	TED LIABILITY COMPANY					
D	Number0075130	Annual Report for the year1999					
1.	The name of the limited liability company Short Point Realty LLC	is:					
2.	The address of the principal office of the limited liability company is: 266 Narragansett Avenue, Jamestown, RI 02835						
3. 4.	The standard of the resident egent in: Daniel H. Wright, Edwards & Angell						
 6. 	the Color Co						
state: Real Estate Management 7. If the limited liability company has managers, the name and address of each manager of the limited company							
	Name	Address					
	Daniel H. Wright	Jamestown, RI 02835					
Da	PAID SEP 16 1999 SECY DESTATE 2288	Under penalty of perjury, I declare and affirm that I have examine report, including any accompanying schedules and statement that all statements contained herein are true and correct. Short Point Realty LLC Exact Name of Limited Liability Company Daniel H. Wright, Manager Title	ined this				



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

	Liitii	TED EIABIETT COM AICT					
ID	Number0075130	Annual Report for the year					
1.	The name of the limited liability company i	s:					
	Short Point Realty LLC						
2.	The address of the principal office of the limited liability company is: 266 Narragansett Avenue, Jamestown, RI 02835						
3.	The state or other jurisdiction under the law	vs of which it is formed is: Rhode Island					
4.	The name and address of its resident ager	tis: Daniel H. Wright, Edwards & Angell					
	2800 BankBoston Plaza, Provide						
5.	The current mailing address of the lim communications may be directed are:						
	. A brief statement of the character of the business in which the limited liability company is actually engaged in t state:Real Estate Management						
7.	company	agers, the name and address of each manager of the limited liabil					
	Name Daniel II Unicht	Address					
	Daniel H. Wright	206 Narragansett Avenue					
		Jamestown, RI 02835					
Da	ded October 31, 19 98	Under penalty of penury, I declare and affirm that I have examined the report, including any accompanying schedules and statements, a that all statements contained herein are true and correct.					
	DIAG	Short Point Realty LLC					
	SEP 1.6 1999 22 80 87	By Daniel H. Wright, Manager					
		Tille					



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

	L11V	ITED LIABILITY COMPANY				
ID	Number <u>0075130</u>	Annual Report for the year1997				
1.	The name of the limited liability company	is:				
	SHORT POINT REALTY LLC					
2.	The address of the principal office of the limited liability company is: McGovern, Noel & Benik, 1600 Hospital Trust Tower, Providence, RI 02903					
3.	The state or other jurisdiction under the la	ws of which it is formed is: RHODE ISLAND				
4.	The name and address of its resident age	nt is: DANIEL H. WRIGHT				
	_	500 Hospital Trust Tower, Providence, RI 02903				
	communications may be directed are:	business in which the limited liability company is actually engaged in this				
7.	If the limited liability company has mar company	nagers, the name and address of each manager of the limited liability				
	Name	Address				
	DAMTEL & WRIGHT	McGovern, Noel & Benik				
		1600 Hospital Trust Tower, Providence, RI 02903				
Dai	88 1 1 1 1 1 1 1 1 1	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.				
	PAID	SHORT POINT REALTY LLC				
	DEC 3 0 1997	Exact Name of Limited Liability Company				
	SECTY OF STATE	DANIEL H. WRIGHT MANAGER Title				

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 Corporation Division 100 North Main Street Providence, RI 02903-1335

LIMITED LIABILITY COMPANY

Annual Report for the year 1996

	Annual Report for the year			
C 1.D.# 75130				
researched lightlifty com	npany is: SHORT POINT REALTY LLC			
FIRST: The name of the limited liability com	party to a trability company is:			
ECOND: The address of the principal office of				
48 WALCOTT AVENUE	ISLAND 02000			
JAMESTOWN, RHODE ISLAND 02835 THIRD: The state or other jurisdiction under the laws of which it is formed is: Rhode Island				
OURTH: The name and address of its residen				
DEBORAHAFOPPE	RT, ESQ. STOWN, RHODE ISLAND 02835			
PO BOX 241	and the name or title of a person to whom			
FIFTH: The current mailing address of	the limited liability company and the name or title of a person to whom			
	, are.			
REBECCA H. WRIGHT	, MANAGER RVARD, MASSACHUSETTS 01451			
a build atatement of the characte	er of the business in which the corporation is actually engaged in this state:			
SIXTH: A brief statement of the				
REAL ESTATE MANA	AGEMENT			
	SHORT POINT REALTY LLC Exact Name of Limited Liability Company			
Dated	Exact Name of Limited Liability Company			
,				
, ,				
File Date:	Rebella H. Uright			
Check No: 1022	*By*To be signed in the manner required by the home state.			
Crieck No.				
By:	Title MANAGER			
For Secretary of State Use Only				
	18. Ha C			
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State of Rhode Island and Providence Plantations

Office of the Secretary of State Corporation Division 100 North Main Street Providence, RI 02903-1335

LIMITED LIABILITY COMPANY

LLC I.D. #	0075130		Annual Report for the year	1995
FIRST:	The name of the limited liabilit	y company is:		
	SHORT POINT REALT	ry LLC		
SECOND:	The address of the principal of		pility company is:	
	***************************************	•••••••		
	JAMESTOWN, RHODE	ISLAND U2835		
THIRD:	The state or other jurisdiction	under the laws of whi	ch it is formed is:	
	RHODE ISLAND		••••	
FOURTH:	The name and address of its DEBORAH A. FOPPE	RT, ESO.		
	48 WALCOTT AVENU	E, JAMESTOWN,	RHODE ISLAND 02835	.
FIFTH:	communications may be dire	cted are: T, MANAGER	ompany and the name or title of a p	
	130 AYER ROAD, H			
SIXTH	state:		n which the corporation is actually	engaged in this
	REAL ESTATE MAI	••••••		
SI Dated	EPTEMBER 95		POINT REALTY LLC	
Dateu	, 19		Exact Name of Limited Liability Comp	any
	and the second second	4 D	Roborca H Mr	i Aut
V	10 3620	-ву	MANAGER	/
N		Title		

FORM LLC-19 7/95

^{*}To be signed in the manner required by the home state.

ling Fee \$50.00 ayable to: ecretary of State

PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations Office of The Secretary of State

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

File Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1

401-277-3040	1994
Appual	Report for the year:
00/225	
SHOK! FOX::	
Name of Business Entity:	isiness Entity is (check one):
Business entity organized under the laws of the State of RHODE ISLAND	Business Corporation (See RIGL Chapter 7-1.1)
Identification Number:	
to to bong number of principal office	[x] Limited Liability Company jame, title and mailing address of contact person to whom ommunications may be directed:
	REBECCA H. WRIGHT
	130 AYER ROAD
Phone: () Rhode	HARVARD, MASSACHUSETTS 0.1451 transit in Rhode Island:
Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):	Brief statement of the character of business conducted in the
Island (Provide street audiess 7 AVENUE 48 WALCOTT AVENUE	REAL ESTATE MANAGEMENT
JAMESTOWN, RHODE ISLAND 02835	10/27/1993
JAMESTOWN, KRODE TREE	Date of Organization:
Phone: (
Phone: \(\frac{1}{2} - \frac{1}{2} - 1	TIPCODE
THE NAMES OF THE	OFFICERS ARE: CITY/STATE
PRESIDENT (Check Oct)	HARVARD, MASSACHUSETTS ZIP CODE O 1 4 5 1
REBECCA H. WRIGHT 130 AYER ROAD REBECCA H. WRIGHT Check One: CHIEF OPERATING OFFICER OR CONCEPTESIDENT (Check One:	(11/2/100) 0 1 4 5 1 2/PCODE
TI CHIEF OPERATING OFFICER OR VICE PRESIDENT (CHECK ONE.	CITY/STATE:
CUSTODIAN OF RECORDS OR SECRETARY (Check One) STREET ADDRESS.	
	CITY/STATE
THE ASURER (Check O're)	
1	E DIRECTORS ARE:
THE NAMES OF STREET ADDR	ZEGO
NAME STREET ADD	CITY/STATE
	CITY/STATE
NAME STREET ADL	DRESS
NAME	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER
NUMBER	CLASS
CLASS	SERIES
SERIES	PAR VALUE OR
PAR VALUE OR	WITHOUT PAR
WITHOUT PAR	Resecce H. Wright
94 By:	

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