

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 IMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR.

Filing Period: Septen CEORM MIST BE TYPED	nber 1 + November 1 OR PRINTED IN BLACK)	• Filing Fee: \$5	0.00					
1. ID No.		name of the limited liability company						
135132	•	C Broadway Properties LLC						
3. State of Formation			usiness which is actually conducted in	Rhode Island				
RHODE ISLAND					10111111			
5. Principal office address 242 Brackway			Pravider	scc State [2]	2402903			
6. MAILING ADDRE	SS OF LIMITED LABII	LITY COMPANY AN	D NAME OR TITLE OF CONT	ACT PERSON:				
Contact Name	nic Henn	er +	Contact Title	tyrat				
Sireci Address	nce Henn	Den	Prw. de.co	State R.	02903			
	FILL IN SPA	ACES BEFORE USIN	ED LIABILITY COMPANY, IF I'G ATTACHMENT'S ("X" BO I'RES FILING OF AMENDMEN	X FOR ATTACHMENT) 🔲				
Manager Name			Manager Name	Manager Name				
Street Address			Street Address	Street Address				
City	State	Zip	Gity	State	Zip			
Manager Name		I	Afanager Name	Manager Name				
Street Address		-	Street Address	Street Address				
City	State	Zφ	City	State	Zip			
Agent Name	T IN RHODE ISLAND	DO NOT ALTER -	Changes require filing of Fo	orm 642 - R.I.G.L. 7-16-1	1			
JANICE HANNERT			City	Cip: Zip				
Address			'					
242 BROADWAY			PROVIDENCE	PROVIDENCE 02903-				

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

File Date 135132*	
Check No.	
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.

TSIZUAFH

Print or Type Name of Authorized Person



Corporations Division 100 North Main Street Providence, RI 02903-1335 401,222,3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR _

2004

Filing Period: Septen (FORM MUST BE TYPED)		• Filing Fee: \$5	0.00				
1. ID No. 135132	2. Exact name of the limited hability company Historic Broadway Properties LLC						
3 State of Formation	4. Brief descripite	n of the character of the h	usiness which is actually conducted in R	thode Island	· · · · · · · · · · · · · · · · · · ·		
RHODE ISLAND							
5. Principal office address 242 B(Se			Presidence	State 721	02903		
6. MAILING ADDRES	SS OF LIMITED LIABI	LITY COMPANY AN	D NAME OR TITLE OF CONTA	CT PERSON:			
Contact Name	nice Hen	ne(t	Contact Title Age.	Contact Title Agent			
Street Address 242 Broadway			Prasider	State Z	24 2503		
	FILL IN SP	ACES BEFORE USIN	ED IJABILITY COMPANY, IF A G ATTACHMENTS ("X" BOX IRES FILING OF AMENDMENT	FOR ATTACHMENT)	7-16-52		
Manager Name			Manager Name	•			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zψ		
	IN RHODE ISLAND	· DO NOT ALTER - (: Changes require filing of For	m 642 - R.I.G.L. 7-16-11	'		
Agent Name			Address				
JANICE HANNERT	•						
Address			City				
242 BROADWAY			PROVIDENCE	PROVIDENCE 02903-			

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Sknawer of Authorized Person Date

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