

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) I. ID No. 2. Exact name of the limited liability company 81634 **AER LLC** 3. State of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island REAL AND PERSONAL PROPERTY LEASING RHODE ISLAND 5. Principal office address State Zip 150 CHESTNUT STREET **PROVIDENCE** RI 02903 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON Contact Name Contact Title MANAGING MEMBER Street Address City State Zio 150 CHESTNUT STREET . PROVIDENCE 02903 RI 7: NAME AND ADDRESS OF EACH MANAGER OF THE DIMITED 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 NONE Street Address ·Street Address City State State Zip ·Ciry Zip Manager Name Manager Name Street Address Street Address City City State Zip Zip State 8. RESIDENT AGENT, IN RHODE ISLAND -DO NOT ALTER-Changes require-filing of Form 642 - RLGL. 7-16-11 Address JAMES P. REDDING, ESQ. 1500 FLEET CENTER Address .24 PROVIDENCE 02903 This report must be signed in ink by an authorized person pursuant to 716-66. 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. *81634 DLLC 10/17/Ø5 11:06:36 AM* File Date Signature of Authorized Person Check No. skelding Kinos Print or Type Name of Authorized Person FOR SECRETARY OF STATE USE ONLY Form 632 Rev. 6/02

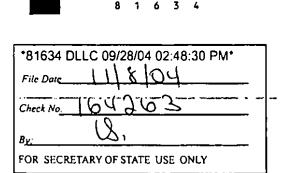


Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RJ 02903-1335 401.222.3040

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) I. ID No. 2. Exact name of the limited liabilty company 81634 **AER LLC** 3. State of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island REAL AND PERSONAL PROPERTY LEASING RHODE ISLAND 5. Principal office address State Zip 150 CHESTNUT STREET **PROVIDENCE** RI 02903 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON Contact Name Contact Title MANAGING MEMBER Street Address State Cirv Zio . PROVIDENCE 150 CHESTNUT STREET RI 02903 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 None Street Address · Street Address State City State Zip ·City Zip Manager Name Manager Name Street Address ·Sireei Address City State City State Zip Zip 8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.GL. 7-16-11 Agent Name JAMES P. REDDING, ESQ. 1500 FLEET CENTER Address Zip PROVIDENCE 02903

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, and that all statements contained herein are true and correct.

Signature of Alchorized Person

Date

James P. Redding / Print or Type Name of Authorized Person

Form 632 Rev. 6/02



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) I. ID No. 2. Exact name of the limited liabilty company 81634 **AER LLC** 3. State of Formation 4. Brief description of the character of the business which is actually conducted in Rhode Island REAL AND PERSONAL PROPERTY LEASING RHODE ISLAND State 5 Principal office address Zip RI PROVIDENCE 02903 150 CHESTNUT STREET 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title PAUL ROIDOULIS Street Address State Zip 150 CHESTNUT ST. . PROVIDENCE RΙ 02903 7: NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY IF APPLICABLE FILIZIN SPACES BEFORE USING ATTACHMENTS ** CX BOX FOR ATTACHMENT) ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L 7-16-12:(a) (2) 1-7-16-52 Manager Name · Manager Name None Street Address · Street Address State City State Ζιp City Z_{IP} Manager Name Manager Name Street Address ·Street Address City State City Zip Zip State 8: RESIDENT AGENT IN RHODE ISLAND DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L JAMES P. REDDING, ESQ. 1500 FLEET CENTER Address City Zıp PROVIDENCE 02903

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





14.

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.

81634	DLLC +0/09/03 12:01:30 PM
File Date	
Check No.	DEC-1-9-2003
Ву:	By M14526
FOR SEC	RETARY OF STATE USE ONLY

		/
	Signature of Authorized Person	D
_ <	James P. Redding	
p 🖟	Print or Type Name of Authorized Pe.	rsod



Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

	YPED OR PI							
1. ID No. *81634*	AER	2. Exact name of the limited liabilty company AER LLC						
3. State of Formation RHODE ISLAN		4. Brief descrip RBAL AND	ntion of the character of the PERSONAL PROPERT	e business which is actually conducted in LEASING	n Rhode Island			
5. Principal office at 150 CHESTNU		r —		City PROVIDENCE	State RI	2ip 02903		
Contact Name	DRESS C)F LIMITED	LIABILITY COMP	Contact Title	OF CONTACT PE	RSON:		
Street Address 150 CHESTNU	r st.		•	City PROVIDENCE	State RI	Zip 02903		
Manager Name		FILL IN S	PACES BEFORE USIN	LIMITED LIABILITY COMP G ATTACHMENTS ("X" BOX FO UIRES FILING OF AMENDMENT. R • Manager Name	OR ATTACHMENT) [
Sircei Address				• Street Address	• Street Address			
				•				
City		State	Zip	*City	State	Zip		
		State	Zip	*City *Manager Name	State	Zip		
City Manager Name Street Address	••••	State	Zip		State	Zip		
Manager Name Street Address		State	Zip	Manager Name	State	Zip		
Manager Name Street Address City	GENT IN R	State	Zip	Manager Name Street Address	State	Zip		
Manager Name Street Address City 8. RESIDENT AC		State HODE ISLAN	Zip	Manager Name Street Address City hanges require filing of Fo	State orm 642 · R.I.G.L.	Zip		

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

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*81634 DLLC1	O/±6	702	2	ð	βP	M°		
File Date	01	0	7	200	2-			-
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FOR SECRETARY	OF S	TAT	E US	SE C	NES			

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 James P. Redding

Form 632 Rev. 6/02

To be filed annually between September 1 and November 1

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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

ID	Number DLLC 81634	Annual Report for the year 2001
1.	The name of the limited liability company is:	
	AER LLC	
2.	The address of the principal office of the limi	ted liability company is:
	150 Chestnut Street, Providence, RI 0290)3
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 agent	is: JAMES P. REDDING, ESQ.
	1500 FLEET CENTER PROVIDENCE RI 02	2903
5.	· ·	r. 03
6.	ototo: Real estate	usiness in which the limited liability company is actually engaged in this
7.	Name	Address Address
Da	ated 10.15.0	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. AER LLC Exact Name of Limited Liability Company
	FOR SECRETARY OF STATE USE ONLY c Date: //- 22 -/ /	By Resident Agent
Cho By	eck No.:/389 (14)	Title Form No. 632 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

ID N	umber	81634		Annual Report for the year
1.	The na	me of the limited liability	y company is:	
2.		dress of the principal of		
3.	The stat	te or other jurisdiction u	inder the laws	of which it is formed is: Rhode Island
4.	The nar	ne and address its resi	dent agent is:	James P. Redding, Esq.
	<u>Hinck</u>	ley, Allen & Snyder, 150	00 Fleet Center	r, Providence, RI 02903
5.		rrent mailing address		ed liability company and the name or title of a person to whom
	150 C	hestnut Street, Provide	nce, RI 02903	
6.	A brief state:	statement of the cha	racter of the b	usiness in which the limited liability company is actually engaged in this
7.	If the li	mited liability company Name	has managers	, the name and address of each manager of the limited liability company Address
À,		. .	 -	
				
Dated	i	,	2000	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.
		FILED		AER LLC Exact Name of Limited Liability Company
		DEC 1 8 2000		Ву
	8	132/40		
_	(Resident Agent Title
	No. LLC- ed 8/97	19		

Filing Fee: \$50.00

To be filed annually between September I and November I

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

LIMITED LIABILITY COMPANY

ID Number 0081634

Annual Report for the year 1999

1. The name of the limited liability company is: AER LLC

2. The address of the principal office of the limited liability company is:

150 Chestnut Street Providence, RI 02903

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 agent is: Sandra Matrone Mack as Secretary HASLAW, LLC, 1500 Fleet Center, Providence, RI 02903
- The current mailing address of the limited liability company and the name or title of a
 person to whom communications may be directed are: Managing Member, 150 Chestnut Street,
 Providence, RI 02903
- 6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Real and personal property leasing
- 7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Form No. LLC-19
Revised 8/97

To be filed annually between September I and November I

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

LIMITED LIABILITY COMPANY

ID Number	0081634
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Revised 8/97

Annual Report for the year 1998

1. The name of the limited liability company is:

AER LLC

2. The address of the principal office of the limited liability company is:

150 Chestnut Street, Providence, RI 02903

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 agent is: James P. Redding, Esq., 170 Westminster Street, Suite 1000, Providence, RI 02903
- The current mailing address of the limited liability company and the name or title of a
 person to whom communications may be directed are: Managing Member, 150 Chestnut Street,
 Providence, RI 02903
- 6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Real and personal property leasing
- 7. If the limited liability company has managers, the name and address of each manager of the limited liability company

павину сопрану	
Name	Address
Dated /0/8/98	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.
FILED OCT 1 3 1998 CORTO 3 By 2278	AER LLC Exact Name of Limited Liability Company By: Authorized Member
Form-No. LLCG 11157 h	

Filing Fee: \$50.00



Form No. LLC-19 Revised 8/97

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	Number 0081634	Annual Report for the year _	1997
1.	The name of the limited liability company AER LLC	is:	<u></u>
2.	The address of the principal office of the li		
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	ntis:James P. Redding, Esq.	
	170 Westminster Street, Pr	ctovidence,RI 02903	
5.	The current mailing address of the lincommunications may be directed are:		person to whom
	state: Real and personal pr		
7.	If the limited liability company has man company Name	nagers, the name and address of each manager of t Address	ne limited liability
	OCT 20 1997 CC1238 LS, HM S3 C 17 129	Under penalty of perjury, I declare and affirm that I h report, including any accompanying schedules and that all statements contained herein are true and correspond to the LLC Exact Name of Limited Liability Company	d statements, and
	3. (1.) 33. (1.)	Authorized Member 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 Countries and the grant of granted Providence, RI 02903-1335 The ones of the providence of the factor of the state of the sta
12 3 2 3 3 7 1	LIMITED LIABILITY COMPANY
LLC I.D.# 8	1634 Annual Report for the year 1996
LLC 1.U.# 0	1034
FIRST:	The name of the limited liability company is: AER LLC
	The address of the principal office of the limited liability company is:
SECOND.	150 Chestnut Street, Providence, RI 02903
THIRD:	The state or other jurisdiction under the laws of which it is formed is. Rhode Island
FOURTH:	The name and address of its resident agent is: James P. Redding, Esq.
	170 Westminster St., Suite 1000, Providence, RI 02903
FIFTH:	The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Managing Member Providence Providen
	150 Chestnut Street, Providence, RI 02903
SIXTH	: A brief statement of the character of the business in which the corporation is actually engaged in this state: Real and personal property leasing.
Dated	1/27 19 92 AER LLC Exact Name of Limited Liability Company
File Date Check No By	*By *To be signed in the manner required by the home state. Authorized Member
For Ser	retary of State Use Only

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

LC I.D. #	Annual Report for the year 1995
FIRST:	The name of the limited liability company is: AER: LLC
SECOND:	The address of the principal office of the limited liability company is: 150 Chestnut Street
	Providence, RI 02903
THIRD:	The state or other jurisdiction under the laws of which it is formed is: R I
FOURTH:	The name and address of its resident agent is: James P. Redding
	170 Westminster St., Providence, RI 02903
FIFTH:	The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Managing Member
	150 Chestnut Street, Providence, RI 02903
SIXTH:	: A brief statement of the character of the business in which the corporation is actually engaged in this state:
	Real and personal property leasing
Dated O	AER LLC Exact Name of Limited Liability Company
	Exact Name of Limited Liability Company By Title Authorized Member
	Title Authorized Member

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