



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)

1. ID No. 138439		2. Exact name of the limited liability company CODDINGTON MANAGEMENT, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island Property management			
5. Principal office address P.O. Box 6884		City Providence	State RI	Zip 02940	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name ROBERT A. SWEET			Contact Title MANAGER		
Street Address P.O. Box 6884		City Providence	State RI	Zip 02940	
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 None			Manager Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name NONE			Manager Name NONE		
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 SYDNEY I. RESNICK, ESQ.			Address		
Address 1005 RESERVOIR AVENUE			City CRANSTON	Zip 02910-	

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



File Date 10/4/05 *138439*

Check No. 1019

By: [Signature]

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.

Robert A. Sweet, Manager 9/6/05
Signature of Authorized Person Date

ROBERT A. SWEET, MANAGER
Print or Type Name of Authorized Person