



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00  
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No 68939		2. Name of Corporation CONVENTION REALTY, LTD.			
3. Street Address Principal Business Office 198 Dyer Street			City Providence	State RI	Zip 02903
4. Business Phone No. 521-6400		5. State of Incorporation RHODE ISLAND		6. SIC Code 5538	
7. Brief Description of the Character of Business Conducted in Rhode Island THE ACQUISITION, DEVELOPMENT, BUYING AND SELLING OF REAL ESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Dennis M.P. Odess			Vice President Name Dennis M.P. Odess		
Street Address 198 Dyer Street			Street Address 198 Dyer Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Dennis M.P. Odess			Treasurer Name Dennis M.P. Odess		
Street Address 198 Dyer Street			Street Address 198 Dyer Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Dennis M.P. Odess			Director Name		
Street Address 198 Dyer Street			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Par Value	Par Value	Number of Shares	Class/Par Value	Par Value
1,000 COMM NO PAR VALUE			None		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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.

Dennis M.P. Odess Feb. 15, 2005  
Signature of Officer Date

Dennis M.P. Odess  
Print or Type Name of Officer

President  
Title of Officer

File Date 2/16/05  
Check No. 0919  
By: W.  
FOR SECRETARY OF STATE USE ONLY



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>68939</b>		2. Name of Corporation <b>CONVENTION REALTY, LTD.</b>			
3. Street Address Principal Business Office <b>198 Dyer Street</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
4. Business Phone No. <b>521-6400</b>		5. State of Incorporation <b>RHODE ISLAND</b>		6. SIC Code <b>5538</b>	
7. Brief Description of the Character of Business Conducted in Rhode Island <b>THE ACQUISITION, DEVELOPMENT, BUYING AND SELLING OF REAL ESTATE.</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Dennis M.P. Odess</b>			Vice President Name <b>Dennis M.P. Odess</b>		
Street Address <b>198 Dyer Street</b>			Street Address <b>198 Dyer Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
Secretary Name <b>Dennis M.P. Odess</b>			Treasurer Name <b>Dennis M.P. Odess</b>		
Street Address <b>198 Dyer Street</b>			Street Address <b>198 Dyer Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Dennis M.P. Odess</b>			Director Name		
Street Address <b>198 Dyer Street</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>1,000 COMM NO PAR VALUE</b>			<b>None</b>		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 8 9 3 9 \*

File Date 2/12/04  
Check No. 739  
By: DA  
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.

Dennis M.P. Odess Feb. 10, 2004  
Signature of Officer Date

Dennis M.P. Odess  
Print or Type Name of Officer  
President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **68939** 2. Name of Corporation **CONVENTION REALTY, LTD.**

3. Street Address Principal Business Office **198 Dyer Street** City **Providence** State **RI** Zip **02903**  
4. Business Phone No. **521-6400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island

**Real estate rental**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>Dennis M. P. Odess</b> Street Address <b>198 Dyer Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Vice President Name <b>Dennis M. P. Odess</b> Street Address <b>198 Dyer Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>
Secretary Name <b>Dennis M. P. Odess</b> Street Address <b>198 Dyer Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Treasurer Name <b>Dennis M. P. Odess</b> Street Address <b>198 Dyer Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>Dennis M. P. Odess</b> Street Address <b>198 Dyer Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Director Name  Street Address  City State Zip
Director Name  Street Address  City State Zip	Director Name  Street Address  City State Zip

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
<b>1,000 COMM NO PAR VALUE</b>		

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES	Class/Series	Par Value
Number of Shares		
<b>None</b>		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 8 9 3 9 \*

File Date: 2-26-03  
Check No.: 2027  
By: KMC

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 Officer [Signature] Date Feb. 26, 2003

Dennis M. P. Odess  
Print or Type Name of Officer

President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **68939** 2. Name of Corporation **CONVENTION REALTY, LTD.**  
3. Street Address Principal Business Office **198 Dyer Street** City **Providence** State **RI** Zip **02903**  
4. Business Phone No. **521-6400** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**Real Estate Rental**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>Dennis M. P. Odess</b> Street Address <b>198 Dyer Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Vice President Name <b>Dennis M. P. Odess</b> Street Address <b>198 Dyer Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>
Secretary Name <b>Dennis M. P. Odess</b> Street Address <b>198 Dyer Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Treasurer Name <b>Dennis M. P. Odess</b> Street Address <b>198 Dyer Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>Dennis M. P. Odess</b> Street Address <b>198 Dyer Street</b> City <b>Providence</b> State <b>RI</b> Zip <b>02903</b>	Director Name  Street Address  City State Zip City State Zip
---	---

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**1,000 COMM NO PAR VALUE**

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**None**

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIVISION  
FEB 15 2:39 PM '02

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 8 9 3 9 \*

File Date: 2/15/2002

Check No.: 1820

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.

[Signature] Feb. 12, 2002  
Signature of Officer Date

**Dennis M. P. Odess**  
Print or Type Name of Officer

**President**  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED) IN BLACK)

1. Corporate ID No. **68939** 2. Name of Corporation **CONVENTION REALTY, LTD.**

3. Street Address Principal Business Office  
100 Fountain Street  
City Providence State RI Zip 02903  
4. Business Phone No. 521-6400  
5. State of Incorporation **RHODE ISLAND**  
6. ~~5538~~

7. Brief Description of the Character of Business Conducted in Rhode Island  
Real Estate Rental

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Dennis M.P. Odess Street Address 100 Fountain Street City Providence State RI Zip 02903	Vice President Name Dennis M.P. Odess Street Address 100 Fountain Street City Providence State RI Zip 02903
Secretary Name Dennis M.P. Odess Street Address 100 Fountain Street City Providence State RI Zip 02903	Treasurer Name Dennis M.P. Odess Street Address 100 Fountain Street City Providence State RI Zip 02903

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Dennis M.P. Odess Street Address 100 Fountain Street City Providence State RI Zip 02903	Director Name  Street Address  City Providence State RI Zip 02903
Director Name  Street Address  City Providence State RI Zip 02903	Director Name  Street Address  City Providence State RI Zip 02903

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
1,000 COMM NO PAR VALUE

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
None

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 8 9 3 9 \*

**FILED**

File Date: MAR 08 2001

Check No.: \_\_\_\_\_

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.

[Signature] Feb 28, 2001  
Signature of Officer Date

Dennis M.P. Odess  
Print or Type Name of Officer

President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 68939  
2. Name of Corporation Convention Realty, Ltd.  
3. Street Address Principal Business Office 100 Fountain Street  
4. Business Phone No.  
5. State of Incorporation Rhode Island  
City Providence State RI Zip 02903  
6. SIC Code 5538

7. Brief Description of the Character of Business Conducted in Rhode Island

Real Estate Rental

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

President Name Dennis M.P. Odess Street Address 100 Fountain Street City Providence State RI Zip 02903	Vice President Name Dennis M.P. Odess Street Address 100 Fountain Street City Providence State RI Zip 02903
Secretary Name Dennis M.P. Odess Street Address 100 Fountain Street City Providence State RI Zip 02903	Treasurer Name Dennis M.P. Odess Street Address 100 Fountain Street City Providence State RI Zip 02903

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name Dennis M.P. Odess Street Address 100 Fountain Street City Providence State RI Zip 02903	Director Name  Street Address  City State Zip
Director Name  Street Address  City State Zip	Director Name  Street Address  City State Zip

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
1,000 Shs	Comm No Par Val	

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
Number of Shares		
None		

**FILED**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

JUL 11 2000  
By Dennis M.P. Odess  
247867

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.

File Date: \_\_\_\_\_

Dennis M.P. Odess July 11, 2000  
Signature of Officer Date

Check No.: \_\_\_\_\_

Dennis M.P. Odess  
Print or Type Name of Officer

By: \_\_\_\_\_

President  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>68939</b>		2. Name of Corporation <b>CONVENTION REALTY, LTD.</b>	
3. Street Address Principal Business Office <b>328 Cowesett Avenue Ste 5</b>		City <b>West-Warwick</b>	State <b>RI</b>
4. Business Phone No. <b>401-821-6333</b>		5. State of Incorporation <b>RHODE ISLAND</b>	6. SIC Code <b>5538</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Real Estate Rental</b>			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>Bernard A. Poirier, CPA</b>		Vice President Name <b>Bernard A. Poirier</b>	
Street Address <b>328 Cowesett Ave Ste 5</b>		Street Address <b>328 Cowesett Ave Ste 5</b>	
City <b>West-Warwick</b>	State <b>RI</b>	City <b>West-Warwick</b>	State <b>RI</b>
Zip <b>02893</b>		Zip <b>02893</b>	
Secretary Name <b>Bernard A. Poirier</b>		Treasurer Name <b>Bernard A. Poirier</b>	
Street Address <b>328 Cowesett Ave Ste 5</b>		Street Address <b>328 Cowesett Ave Ste 5</b>	
City <b>West-Warwick</b>	State <b>RI</b>	City <b>West-Warwick</b>	State <b>RI</b>
Zip <b>02893</b>		Zip <b>02893</b>	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name <b>Bernard A. Poirier</b>		Director Name <b>Bernard A. Poirier</b>	
Street Address <b>328 Cowesett Ave Ste 5</b>		Street Address <b>328 Cowesett Ave Ste 5</b>	
City <b>West-Warwick</b>	State <b>RI</b>	City <b>West-Warwick</b>	State <b>RI</b>
Zip <b>02893</b>		Zip <b>02893</b>	
Director Name <b>Bernard A. Poirier</b>		Director Name <b>Bernard A. Poirier</b>	
Street Address <b>328 Cowesett Ave Ste 5</b>		Street Address <b>328 Cowesett Ave Ste 5</b>	
City <b>West-Warwick</b>	State <b>RI</b>	City <b>West-Warwick</b>	State <b>RI</b>
Zip <b>02893</b>		Zip <b>02893</b>	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares <b>1,000 SHS COMM NO PAR VAL</b>	Class/Series	Number of Shares <b>1000</b>	Class/Series <b>A</b>
Par Value		Par Value <b>No Par</b>	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 8 9 3 9 \*

File Date: 04-07-99  
Check No.: 1052  
By: JD

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 Officer

4/18/99  
Date

**Bernard A. Poirier**  
Print or Type Name of Officer

**President**  
Title of Officer

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **68939** 2. Name of Corporation **CONVENTION REALTY, LTD.**  
3. Street Address Principal Business Office **328 Cowesett Avenue Suite 5** City **West Warwick** State **RI** Zip **02893**  
4. Business Phone No. **821-6333** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**  
7. Brief Description of the Character of Business Conducted in Rhode Island

RealEstate Rental

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

President Name <b>Bernard A. Poirier</b>	Vice President Name <b>Bernard A. Poirier</b>
Street Address <b>328 Cowesett Ave Suite 5</b>	Street Address <b>328 Cowesett Avenue Suite 5</b>
City State Zip <b>West Warwick RI 02893</b>	City State Zip <b>West Warwick RI 02893</b>
Secretary Name <b>Bernard A. Poirier</b>	Treasurer Name <b>Bernard A. Poirier</b>
Street Address <b>328 Cowesett Avenue Suite 5</b>	Street Address <b>328 Cowesett Avenue Suite 5</b>
City State Zip <b>West Warwick RI 02893</b>	City State Zip <b>West Warwick RI 02893</b>

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name <b>Bernard A. Poirier</b>	Director Name
Street Address <b>328 Cowesett Avenue Suite 5</b>	Street Address
City State Zip <b>West Warwick RI 02893</b>	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	<b>1,000 SHS</b>	<b>COMM NO</b>	<b>PAR VAL</b>

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<b>1000</b>	<b>A</b>	<b>NO PAR</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 8 9 3 9 \*

File Date: \_\_\_\_\_  
Check No.: \_\_\_\_\_  
By: \_\_\_\_\_

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 hereby are true and correct.

**Bernard A. Poirier**  
Signature of Officer \_\_\_\_\_ Date \_\_\_\_\_  
**BERNARD A. POIRIER**  
Print or Type Name of Officer \_\_\_\_\_  
**PRESIDENT**  
Title of Officer \_\_\_\_\_



**PROFIT CORPORATION ANNUAL REPORT 1997**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>68939</b>		2. Name of Corporation <b>CONVENTION REALTY, LTD.</b>	
3. Street Address Principal Business Office <b>328 Cowesett Avenue Suite 5 W. Warwick RI 02893</b>		City	Zip
4. Business Phone No. <b>(401) 821-6333</b>	5. State of Incorporation <b>RHODE ISLAND</b>		6. SIC Code <b>5538</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Real Estate Rental</b>			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			
President Name <b>Bernard A. Poirier, CPA</b>		Vice President Name <b>SAME</b>	
Street Address <b>328 Cowesett Avenue Suite 5</b>		Street Address	
City <b>W. Warwick RI 02893</b>	State	City	Zip
Secretary Name <b>SAME</b>		Treasurer Name <b>SAME</b>	
Street Address		Street Address	
City	State	City	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			
Director Name <b>Bernard A. Poirier</b>		Director Name	
Street Address <b>328 Cowesett Avenue Suite 5</b>		Street Address	
City <b>W. Warwick RI 02893</b>	State	City	Zip
Director Name		Director Name	
Street Address		Street Address	
City	State	City	Zip
10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Par Value	Number of Shares
<b>1,000 SHS COMM NO PAR VAL</b>			<b>1000</b>
			<b>A</b>
			<b>NO PAR</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 8 9 3 9 \*

File Date: 1/6/97  
Check No.: 318  
By: CPA

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.

Bernard A. Poirier  
Signature of Officer Date  
Bernard A. Poirier  
Print or Type Name of Officer  
President  
Title of Officer

**PROFIT CORPORATION  
ANNUAL REPORT**

**1996**



State of Rhode Island and Providence Plantations  
James R. Langevin, *Secretary of State*  
Corporations Division  
100 North Main Street  
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1  
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 68939		2. NAME OF CORPORATION CONVENTION REALTY, LTD.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 328 Cowesett Avenue		CITY West Warwick	STATE RI	ZIP CODE 02893	
4. BUSINESS PHONE NO. 821-6333		5. STATE OF INCORPORATION RHODE ISLAND			8. SIC CODE 5538

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND  
Real Estate Rental

8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Bernard Poirier			VICE PRESIDENT NAME Same		
STREET ADDRESS 328 Cowesett Avenue			STREET ADDRESS		
CITY West Warwick	STATE RI	ZIP CODE 02893	CITY	STATE	ZIP CODE
SECRETARY NAME Same			TREASURER NAME Same		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME Bernard Poirier			DIRECTOR NAME		
STREET ADDRESS 328 Cowesett Avenue			STREET ADDRESS		
CITY West Warwick	STATE RI	ZIP CODE 02893	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
1,000 SHS COMM NO PAR VAL			1000	A	No Par

This report must be **SIGNED IN INK** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date:

1/2/96

Check No:

500

By:

*Handwritten signature*

For Secretary of State Use Only

*Handwritten signature*  
Signature of Officer

Bernard Poirier  
Print or Type Name of Officer

President  
Title of Officer

1-2-96 KID  
Date



**ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.**

Corporate ID: 0068939 Annual Report for the year: 1995

Name of Corporation: Convention Realty, LTD

Business entity organized under the laws of the State of: RI

Business Entity is (check one):  
 Business Corporation (See RIGL Chapter 7-1.1)  
 Professional Service Corporation (See RIGL Chapter 7-5.1)

For foreign entity, address and telephone number of principal office:

Brief statement of the character of business conducted in Rhode Island:

Phone: ( )

Real Estate Rental

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

328 Cowesett Avenue, Suite 5  
West Warwick, RI 02893

Phone: (401) 821-6333

**THE NAMES OF THE OFFICERS ARE:**

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT	<u>Bernard A. Poirier</u>	<u>328 Cowesett Ave, Suite 5</u>	<u>West Warwick, RI 02893</u>
VICE PRESIDENT	<u>Bernard A. Poirier</u>	<u>328 Cowesett Ave, Suite 5</u>	<u>West Warwick, RI 02893</u>
SECRETARY	<u>Bernard A. Poirier</u>	<u>328 Cowesett Ave, Suite 5</u>	<u>West Warwick, RI 02893</u>
TREASURER	<u>Bernard A. Poirier</u>	<u>328 Cowesett Ave, Suite 5</u>	<u>West Warwick, RI 02893</u>

**THE NAMES OF THE DIRECTORS ARE:**

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Bernard A. Poirier</u>	<u>328 Cowesett Ave, Suite 5</u>	<u>West Warwick, RI</u>	<u>02893</u>

NUMBER OF SHARES AUTHORIZED (Rider may be attached)			NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)		
Number of Shares	Class / Series		Number of Shares	Class / Series	
<u>1000</u>	<u>A</u>	<u>No Par</u>	<u>1000</u>	<u>A</u>	<u>No Par</u>

Date Sept 15, 1995

By: Bernard Poirier  
 Bernard A. Poirier  
 PRINT OR TYPE NAME OF OFFICER SIGNING  
 President  
 TITLE OF OFFICER SIGNING

Form 31 1/95

**DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:**

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

**FILED**  
 SEP 20 1995  
 By cc 499

OK # 453 20  
 File Annually  
 LLC: Sept. 1 - Nov. 1  
 CORP: Jan. 1 - March 1

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

Registration Fee \$50.00  
 payable to:  
 Secretary of State

Corporate ID: 0068939 Annual Report for the year: 1994

Name of Business Entity: CONVENTION REALTY, LTD.

Business entity organized under the laws of the State of: RI  
 Federal Taxpayer Identification Number: [REDACTED]  
 For foreign entity, address and telephone number of principal office:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: ( ) \_\_\_\_\_  
 Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):  
328 Cowesett Avenue, Suite 5  
West Warwick, RI 02893  
 Phone: (401) 821-6333

Business Entity is (check one):  
 Business Corporation (See RIGL Chapter 7-1.1)  
 Professional Service Corporation (See RIGL Chapter 7-5.1)  
 Limited Liability Company (See RIGL 7-16)  
 Name, title and mailing address of contact person to whom communications may be directed:  
Bernard A. Poirier  
328 Cowesett Avenue, Suite 5  
West Warwick, RI 02893  
 Brief statement of the character of business conducted in Rhode Island:  
Real Estate Rental  
 Date of Organization: 7/13/92  
 Date of Qualification to do business in Rhode Island (if foreign entity): \_\_\_\_\_

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One)			
<u>Bernard A. Poirier</u>	<u>328 Cowesett Ave, Suite 5</u>	<u>West Warwick, RI</u>	<u>02893</u>
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One)			
<u>Bernard A. Poirier</u>	<u>Same</u>		
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One)			
<u>Bernard A. Poirier</u>	<u>Same</u>		
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One)			
<u>Bernard A. Poirier</u>	<u>Same</u>		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Bernard A. Poirier</u>	<u>Same</u>		

NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER <u>1000</u>	NUMBER <u>1000</u>
CLASS <u>A</u>	CLASS <u>A</u>
SERIES <u>A</u>	SERIES <u>A</u>
PAR VALUE OR WITHOUT PAR <u>No Par</u>	PAR VALUE OR WITHOUT PAR <u>..</u>

1/16  
Bernard Poirier - Pres

Filing Fee \$50.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0058989 Annual Report for the year 1993

FIRST: The name of the corporation is CONVENTION REALTY, LTD.

SECOND: It is incorporated under the laws of RI

THIRD: Character of business, briefly stated, is Real Estate Rental

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 328 Cowesett Ave Suite 5

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
<u>Bernard Poirier</u>	President	<u>328 Cowesett Ave W Warwick RI</u>
	Vice President	
<u>Bernard Poirier</u>	Secretary	<u>Same</u>
<u>Bernard Poirier</u>	Treasurer	<u>Same</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1000</u>	<u>A</u>	<u>A</u>	<u>No Par</u>

Rec'd & Filed FEB 08 1993

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1000</u>	<u>A</u>	<u>A</u>	

Dated Jun 14 19 92

Convention Realty  
(Name of Corporation)  
By Bernard Poirier  
Title President

(Report must be signed by an officer)