



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 02903-1332  
401 222 3649

**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)

1 ID No 96740		2 Exact name of the limited liability company Sheridan Holding, LLC	
3 State of Formation RHODE ISLAND		4 Brief description of the character of the business which is actually conducted in Rhode Island TO ACQUIRE AND INVEST SUCH INTEREST IN REAL PROPERTY	
5 Principal office address 707 PARK EAST DRIVE		City WOONSOCKET	State RI
			Zip 02895
<b>6 MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:</b>			
Contact Name DAVID O. COSTANTINO		Contact Title .	
Street Address 707 PARK EAST DRIVE		City WOONSOCKET	State RI
			Zip 02895-
<b>7 NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE</b>			
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. 7-16-15 (c) (2) 7-16-52			
Manager Name .		*Manager Name .	
Street Address .		*Street Address .	
City .	State .	Zip .	*City .
			*State .
			*Zip .
Manager Name .		*Manager Name .	
Street Address .		*Street Address .	
City .	State .	Zip .	*City .
			*State .
			*Zip .
<b>8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER. Changes require filing of Form 642 - R.I.G.L. 7-16-31</b>			
Agent Name STEVEN I ROSENBAUM, ESQ.		Address 30 EXCHANGE TERRACE	
Address .		City PROVIDENCE	Zip 02903

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



9 6 7 4 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:

*David O. Costantino* 9/8/05  
Signature of Authorized Person Date

DAVID O. COSTANTINO  
Print or Type Name of Authorized Person

\*96740 DLLC 08/30/05 11:57:13 AM\*

File Date 9/16/05

Check No. 1035 C77243

By Kum

FOR SECRETARY OF STATE USE ONLY



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, 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: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. *96740*		2. Exact name of the limited liability company Sheridan Holding, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO ACQUIRE AND INVEST SUCH INTEREST IN REAL PROPERTY			
5. Principal office address 707 PARK EAST DRIVE		City WOONSOCKET	State RI	Zip 02895	
<b>6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:</b>					
Contact Name David O. Costantino			Contact Title		
Street Address 707 PARK EAST DRIVE		City WOONSOCKET	State RI	Zip 02895-	
<b>7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE</b> FILL IN SPACES BEFORE USING ATTACHMENTS TO A 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		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
<b>8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11</b>					
Agent Name STEVEN I. ROSENBAUM, ESQ.		Address 30 EXCHANGE TERRACE			
Address		City PROVIDENCE	Zip 02903		

**FILED**

SEP 13 2004

By KMC M44461

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



**96740* 8/22/022:29:28 PM*
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 herein are true and correct.

David O. Costantino 9/7/04  
Signature of Authorized Person Date

David O. Costantino  
Print or Type Name of Authorized Person



**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. *96740*		2. Exact name of the limited liability company Sheridan Holding, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO ACQUIRE AND INVEST SUCH INTEREST IN REAL PROPERTY	
5. Principal office address 707 PARK EAST DRIVE		City WOONSOCKET	State RI
		Zip 02895	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name David O. Costantino		Contact Title	
Street Address 707 PARK EAST DRIVE		City WOONSOCKET	State RI
		Zip 02895-	
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		Manager Name	
Street Address		Street Address	
City	State	Zip	City
			State
			Zip
Manager Name		Manager Name	
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 STEVEN I. ROSENBAUM, ESQ.		Address 30 EXCHANGE TERRACE	
Address		City PROVIDENCE	Zip 02903

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



\* 9 6 7 4 0 \*

**96740* 8/22/022:29:28 PM*	
File Date	9-22-03
Check No.	271
By	(CIN)
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.

*David O. Costantino* 9/18/03  
Signature of Authorized Person Date

David O. Costantino  
Print or Type Name of Authorized Person



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401.222.3040

**LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002**

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. *96740*		2. Exact name of the limited liability company Sheridan Holding, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO ACQUIRE AND INVEST SUCH INTEREST IN REAL PROPERTY	
5. Principal office address 707 PARK EAST DRIVE		City WOONSOCKET	State RI Zip 02895
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name DAVID O COSTANTINO		Contact Title	
Street Address 707 PARK EAST DRIVE		City WOONSOCKET	State RI Zip 02895-
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		Manager Name	
Street Address		Street Address	
City	State	Zip	City
City	State	Zip	City
Street Address		Street Address	
City	State	Zip	City
8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name STEVEN I. ROSENBAUM, ESQ.		Address 30 EXCHANGE TERRACE	
Address		City PROVIDENCE	Zip 02903

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



\* 9 6 7 4 0 \*

*96740 DLLC8/22/022:28:20 PM*
File Date <u>10/24/02</u>
Check No. <u>209</u>
By: <u>AMF</u>
FOR SECRETARY OF STATE USE ONLY

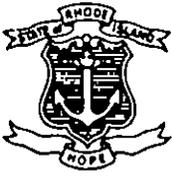
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

David O. Costantino 8/29/02  
Signature of Authorized Person Date

David Costantino  
Print or Type Name of Authorized Person

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  
Corporations Division  
100 North Main Street Providence, Rhode Island 02903-1335  
Telephone (401) 222-3040

**LIMITED LIABILITY COMPANY**

ID Number DLLC 96740

Annual Report for the year 2001

1. The name of the limited liability company is:

Sheridan Holding, LLC

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

707 Park East Drive; Woonsocket, RI 02895

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: STEVEN I. ROSENBAUM, ESQ.

30 EXCHANGE TERRACE PROVIDENCE RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: David O. Costantino

707 Park East Drive; Woonsocket, RI 02895

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: to acquire and invest such interest in real property.

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

Dated 9-19-01



9 6 7 4 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.

Sheridan Holding, LLC

Exact Name of Limited Liability Company

By David O. Costantino

David O. Costantino, Member

Title

Form No. 632  
Revised 01/99

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>9-25-01</u>
Check No.:	<u>178</u>
By:	<u>[Signature]</u>

**DETACH BOTTOM BEFORE RETURNING**

Please detach and mail the above section including payment in the amount of \$50.00 made payable to Secretary of State. If the registered office and/or registered agent indicated below has changed, Form 642 must be filed in this office. Forms may be

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  
Corporations Division  
100 North Main Street Providence, Rhode Island 02903-1335  
Telephone (401) 222-3040

**LIMITED LIABILITY COMPANY**

ID Number DLLC 96740

Annual Report for the year 2000

1. The name of the limited liability company is:

Sheridan Holding, LLC

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

707 Park East Drive; Woonsocket, RI 02895

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: STEVEN I. ROSENBAUM, ESQ

30 EXCHANGE TERRACE PROVIDENCE RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: David O. Costantino

707 Park East Drive; Woonsocket, RI 02895

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: to acquire and invest such interests in real property.

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

*Name*

*Address*

Dated \_\_\_\_\_



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.

Sheridan Holding, LLC

*Exact Name of Limited Liability Company*

By David O. Costantino

David O. Costantino, member

*Title*

FOR SECRETARY OF STATE USE ONLY  
File Date: 10-23-00  
Check No.: 1418  
By: AMK

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  
Corporations Division  
100 North Main Street Providence, Rhode Island 02903-1335  
Telephone (401) 222-3040

**LIMITED LIABILITY COMPANY**

ID Number LL 96740

Annual Report for the year 1999

1. The name of the limited liability company is:  
Sheridan Holding, LLC
2. The address of the principal office of the limited liability company is:  
707 Park East Drive, Woonsocket, RI 02895
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: STEVEN I. ROSENBAUM, ESQ  
30 EXCHANGE TERRACE PROVIDENCE, RI 02903
5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: David Costantino  
707 Park East Drive, Woonsocket, RI 02895
6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: To acquire and invest such interests in real property
7. If the limited liability company has managers, the name and address of each manager of the limited liability company  

<i>Name</i>	<i>Address</i>
_____	_____
_____	_____
_____	_____

Dated \_\_\_\_\_



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.

Sheridan Holding, LLC

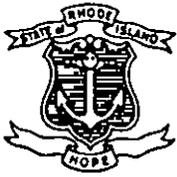
*Exact Name of Limited Liability Company*

By David Costantino  
David Costantino, Member  
*Title*

FOR SECRETARY OF STATE USE ONLY  
File Date: 11-23-99  
Check No.: 124  
By: AMF

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  
Corporations Division  
100 North Main Street Providence, Rhode Island 02903-1335  
Telephone (401) 222-3040

**LIMITED LIABILITY COMPANY**

ID Number LL 96740

Annual Report for the year 1998

1. The name of the limited liability company is:

Sheridan Holding, LLC

2. The address of the principal office of the limited liability company is: 707 PARK EAST DR.

~~2 Clauson Street, East Greenwich, RI 02818~~ WOODSOCKET, RI 02895

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: Steven I. Rosenbaum, Esq., Poore & Rosenbaum,

30 Exchange Terrace, Providence, RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: David O. Costantino

707 PARK EAST DR WOODSOCKET, RI 02895  
~~2 Clauson Street, East Greenwich, RI 02818~~

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: To acquire and invest in such interests in real property as may be selected by the members and any other lawful activity.

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

*Name*

*Address*

David O. Costantino

~~2 Clauson Street, East Greenwich, RI 02818~~

707 PARK EAST DR, WOODSOCKET, RI 02895

Dated \_\_\_\_\_, 19\_\_



\* 9 6 7 4 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.

SHERIDAN HOLDING, LLC

*Exact Name of Limited Liability Company*

By David O. Costantino MGR

David O. Costantino, Manager

*Title*

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>10.21.98</u>
Check No.:	<u>305</u>
By:	<u>ICP</u>

Form No. LLC-19  
Revised 3/97