



**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 <b>109440</b>		2. Exact name of the limited liability company <b>S.V. Development Co., LLC</b>	
3. State of Formation <b>RHODE ISLAND</b>		4. Brief description of the character of the business which is actually conducted in Rhode Island <b>OWNING, MANAGING AND OPERATING REAL ESTATE</b>	
5. Principal office address <b>766 Broadway</b>		City <b>Pawtucket</b>	State <b>R.I.</b>
		Zip <b>02861</b>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name <b>Kenneth Steingold</b>		Contact Title <b>Member</b>	
Street Address <b>766 Broadway</b>		City <b>Pawtucket</b>	State <b>R.I.</b>
		Zip <b>02861</b>	
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	City	State
Zip		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		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 <b>ROBERT E. DAVIGNON, ESQ.</b>		Address	
Address <b>420 ANGELL STREET</b>		City <b>PROVIDENCE</b>	Zip <b>02906</b>

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



\*109440\*

File Date	<b>9-22-05</b>
Check No.	<b>38903</b>
By:	<b>AMF</b>
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 of Authorized Person      Date **9/12/05**

**KENNETH STEINGOLD, Member**  
Print or Type Name of Authorized Person



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

# LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004

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		Zip <b>02861</b>	
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Contact Name <b>Kenneth Steingold</b>		Contact Title <b>Member</b>	
Street Address <b>766 Broadway</b>		City <b>Pawtucket</b>	State <b>R.I.</b>
		Zip <b>02861</b>	
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
Manager Name		Manager Name	
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 <b>ROBERT E. DAVIGNON, ESQ.</b>		Address	
Address <b>420 ANGELL STREET</b>		City <b>PROVIDENCE</b>	Zip <b>02906</b>

**FILED**

SEP 17 2004

By KMC  
m44924

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



\* 1 0 9 4 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.

Kenneth Steingold 9/8/04  
Signature of Authorized Person Date

KENNETH STEINGOLD, Member  
Print or Type Name of Authorized Person

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

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

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

FOR SECRETARY OF STATE USE ONLY



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

**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 109440		2. Exact name of the limited liability company S.V. Development Co., LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island OWNING, MANAGING AND OPERATING REAL ESTATE	
5. Principal office address 766 Broadway		City Pawtucket	State R.I.
		Zip 02861	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Kenneth Steingold		Contact Title Member	
Street Address 766 Broadway		City Pawtucket	State R.I.
		Zip 02861	
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 ROBERT E. DAVIGNON, ESQ.		Address	
Address 420 ANGELL STREET		City PROVIDENCE	Zip 02906

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



\* 1 0 9 4 4 0 \*

File Date	10-24-03
Check No	33375
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.

10/20/03  
Signature of Authorized Person Date  
KENNETH STEINGOLD, Member  
Print or Type Name of Authorized Person



# 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. 109440		2. Exact name of the limited liability company S.V. Development Co., LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island OWNING, MANAGING AND OPERATING REAL ESTATE	
5. Principal office address 766 Broadway		City Pawtucket	State R.I.
		Zip 02861	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Kenneth Steingold		Contact Title Member	
Street Address 766 Broadway		City Pawtucket	State R.I.
		Zip 02861	
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	
Street Address		Street Address	
City	State	Zip	City
Manager Name	Manager Name		
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 ROBERT E. DAVIGNON, ESQ.		Address	
Address 420 ANGELL STREET		City PROVIDENCE	Zip 02906

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



\* 1 0 9 4 4 0 \*

**FILED**

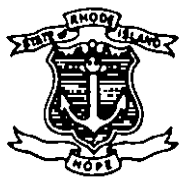
File Date SEP 10 2002  
Check No. By 0229033  
By CL  
FOR SECRETARY OF STATE USE ONLY

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.

Kenneth Steingold 8/31/02  
Signature of Authorized Person Date

KENNETH STEINGOLD, Member  
Print or Type Name of Authorized Person

**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

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Annual Report for the year 2001

1. The name of the limited liability company is:  
S.V. Development Co., LLC
2. The address of the principal office of the limited liability company is:  
766 Broadway, Pawtucket, Rhode Island 02861
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: ROBERT E. DAVIGNON, ESQ.  
420 ANGELL STREET PROVIDENCE RI 02906
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: Kenneth Steingold  
766 Broadway, Pawtucket, R.I. 02861
6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Owning, managing and operating real estate
7. If the limited liability company has managers, the name and address of each manager of the limited liability company
- | Name | Address |
|------|---------|
|      |         |
|      |         |

Dated 8/31/01



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.

S.V. Development Co., LLC

Exact Name of Limited Liability Company

By David J. M.

Kenneth Steingold, Member

Title

Form No. 632  
Revised 01/99

FOR SECRETARY OF STATE USE ONLY

File Date: 9/7/2001

Check No.: 36362

By:

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 109440

Annual Report for the year 2000

1. The name of the limited liability company is: \_\_\_\_\_

S.V. Development Co., LLC

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

766 Broadway, Pawtucket, Rhode Island 02861

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: ROBERT E. DAVIGNON, ESQ.

420 ANGELL STREET PROVIDENCE RI 02906

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: Kenneth Steingold, 766 Broadway, Pawtucket, R.I. 02861

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Owning, managing and operating real estate.

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 September, 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.

S.V. Development Co., LLC

*Exact Name of Limited Liability Company*

By \_\_\_\_\_

Member

*Title*

FOR SECRETARY OF STATE USE ONLY

File Date: FILED

Check No. OCT 04 2000

By: By [Signature]

Form No. 632  
Revised 01/99