



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)

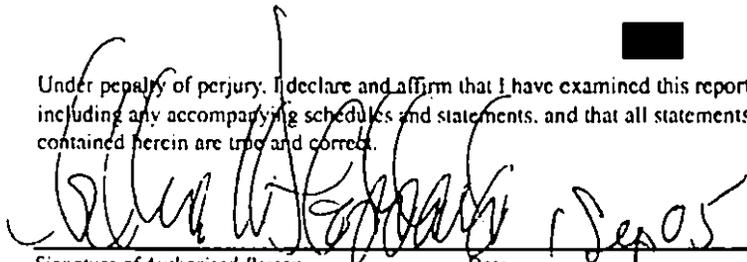
1. ID No. 104843		2. Exact name of the limited liability company Brown & Ives Land Company, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO OWN AND HOLD REAL ESTATE			
5. Principal office address 50 SOUTH MAIN STREET			City PROVIDENCE	State RI	Zip 02903
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name LORRAINE M. TEMPLE			Contact Title FINANCE MANAGER		
Street Address 50 SOUTH MAIN STREET			City PROVIDENCE	State RI	Zip 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) <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 WILLIAM H. D. GODDARD			Manager Name		
Street Address 50 SOUTH MAIN STREET			Street Address		
City PROVIDENCE	State RI	Zip 02903	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 LORRAINE M. TEMPLE			Address BROWN & IVES LAND CO., LLC		
Address 50 SOUTH MAIN STREET			City PROVIDENCE	Zip 02903	

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



File Date	<u>9/9/05</u> *104843*
Check No.	<u>5385</u>
By:	<u>DA</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.


Signature of Authorized Person Date 9 Sep 05

WILLIAM H. D. GODDARD, MANAGER
Print or Type Name of Authorized Person



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. 104843		2. Exact name of the limited liability company Brown & Ives Land Company, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO OWN AND HOLD REAL ESTATE			
5. Principal office address 50 South Main Street			City Providence	State RI	Zip 02903-2919
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Lorraine M. Temple			Contact Title Finance Manager		
Street Address 50 South Main Street			City Providence	State RI	Zip 02903-2919
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 William H. D. Goddard			Manager Name		
Street Address 50 South Main Street			Street Address		
City Providence	State RI	Zip 02903-2919	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 LORRAINE M. TEMPLE			Address BROWN & IVES LAND CO., LLC		
Address 50 SOUTH MAIN STREET			City PROVIDENCE	Zip 02903	

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



* 1 0 4 8 4 3 *

File Date 10/4/04
Check No. 4755
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.

Signature of Authorized Person Date 9/23/03

William H. D. Goddard, Manager
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 3049

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)

Form with fields for ID No (104843), Exact name of the limited liability company (Brown & Ives Land Company, LLC), State of Formation (RHODE ISLAND), Brief description of the character of the business (TO OWN AND HOLD REAL ESTATE), Principal office address (50 South Main Street, Providence, RI, 02903-2919), Mailing address of limited liability company and name or title of contact person (Lorraine M. Temple, Finance Manager), Name and address of each manager of the limited liability company (William H. D. Goddard, 50 South Main Street, Providence, RI, 02903-2919), Resident agent in Rhode Island (Lorraine M. Temple, Brown & Ives Land Co., LLC, 50 South Main Street, Providence, RI, 02903).

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



* 1 0 4 8 4 3 *

File Date: 9-12-03
Check No: 4016
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]
Signature of Authorized Person
Date: 9/11/03

William H. D. Goddard, Manager
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. 104843		2. Exact name of the limited liability company Brown & Ives Land Company, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO OWN AND HOLD REAL ESTATE	
5. Principal office address 50 South Main Street		City Providence	State RI
		Zip 02903	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Lorraine M. Temple		Contact Title Finance Manager	
Street Address 50 South Main Street		City Providence	State RI
		Zip 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) <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 William H. D. Goddard		*Manager Name .	
Street Address 50 South Main Street		*Street Address .	
City Providence	State RI	Zip 02903	*City .
*State .		*Zip .	
*Manager Name .		*Street Address .	
City .	State .	Zip .	*City .
*State .		*Zip .	
*Manager Name .		*Street Address .	
City .	State .	Zip .	*City .
*State .		*Zip .	
*Manager Name .		*Street Address .	
8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name LORRAINE M. TEMPLE		Address BROWN & IVES LAND CO., LLC	
Address 50 SOUTH MAIN STREET		City PROVIDENCE	Zip 02903

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



* 1 0 4 8 4 3 *

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.

William H. D. Goddard

10/31/02

Signature of Authorized Person

Date

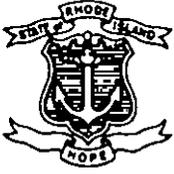
William H. D. Goddard, Manager

Print or Type Name of Authorized Person

File Date 11.6.02
Check No. 3471
By: *W*
FOR SECRETARY OF STATE USE ONLY

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 104843

Annual Report for the year 2001

1. The name of the limited liability company is:

Brown & Ives Land Company, LLC

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

50 South Main Street, Providence RI 02903-2919

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: LORRAINE M. TEMPLE

BROWN & IVES LAND CO., LLC 50 SOUTH MAIN STREET 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: Lorraine M. Temple

50 South Main Street, Providence RI 02903-2919

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: To own and hold real estate

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

Name

Address

William H. D. Goddard

5 Brown Street, Providence RI 02906

Thomas P. I. Goddard

104 Bowen Street, Providence RI 02906

Dated 9/7/01

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.



1 0 4 8 4 3

Brown & Ives Land Company, LLC

Exact Name of Limited Liability Company

By [Signature]

Manager

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 9-17-01

Check No.: 2676

By: [Signature]

Form No. 632
Revised 01/99

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 obtained by contacting this office at 401-222-3040, or from our web site at www.state.ri.us

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 104843

Annual Report for the year 2000

- The name of the limited liability company is:
Brown & Ives Land Company, LLC
- The address of the principal office of the limited liability company is:
c/o Warwick Land Company, 50 South Main Street, Providence, Rhode Island 02903
- The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND
- The name and address of its resident agent is: RICHARD M.C. GLENN, III, Esq., Edwards & Angell, LLP,
2800 BANKBOSTON PLAZA 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: William H.D. Goddard, Manager, c/o Warwick Land Company,
50 South Main Street, Providence, Rhode Island 02903
- A brief statement of the character of the business in which the limited liability company is actually engaged in this state: To own and hold real estate
- 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>
William H.D. Goddard	c/o Warwick Land Company, 50 South Main St., Prov. RI 02903

Dated September 28, 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.

Brown & Ives Land Company, LLC
Exact Name of Limited Liability Company

By: [Signature]
William H.D. Goddard, Manager
Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	PAID
Check No.:	OCT 27 2000 <i>10/10 252934</i>
By:	SECY OF STATE