



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  
401.222.3044

# 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. 104544		2. Exact name of the limited liability company OCEAN STATE REALTY LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO BUY, MANAGE DEVELOP, FINANCE, RENT AND SELL REAL ESTATE			
5. Principal office address 322 BROADWAY		City PROVIDENCE	State RI	Zip 02909	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name LOUIS BOURLOS		Contact Title MANAGER			
Street Address 322 BROADWAY		City PROVIDENCE	State RI	Zip 02909	
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 LOUIS BOURLOS		Manager Name			
Street Address 322 BROADWAY		Street Address			
City PROVIDENCE	State RI	Zip 02909	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 STEPHEN T. NAPOLITANO		Address			
Address 155 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	10/14/05	104544
Check No.	2622	
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.

OCEAN STATE REALTY LLC

By 10/7/05  
Signature of Authorized Person Date  
Louis Bourlos  
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 02903-1334  
401.222.3041

# 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. 104544		2. Exact name of the limited liability company OCEAN STATE REALTY LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO BUY, MANAGE DEVELOP, FINANCE, RENT AND SELL REAL ESTATE	
5. Principal office address 322 BROADWAY		City PROVIDENCE	State RI
			Zip 02909
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name LOUIS BOURLOS		Contact Title MANAGER	
Street Address 322 BROADWAY		City PROVIDENCE	State RI
			Zip 02909
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 LOUIS BOURLOS		Manager Name	
Street Address 322 BROADWAY		Street Address	
City PROVIDENCE	State RI	City	State
	Zip 02909		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 STEPHEN T. NAPOLITANO		Address	
Address 155 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 5 4 4 \*

File Date	11/8/04
Check No.	2270
By:	LS
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 statement contained herein are true and correct.

Signature of Authorized Person  
Louis Bourlos  
10129104  
Date  
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 02903-13  
401.222.30

# 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. 104544		2. Exact name of the limited liability company OCEAN STATE REALTY LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island TO BUY, MANAGE DEVELOP, FINANCE, RENT AND SELL REAL ESTATE			
5. Principal office address 322 BROADWAY		City PROVIDENCE	State RI	Zip 02909	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name LOUIS BOURLOS		Contact Title MANAGER			
Street Address 322 BROADWAY		City PROVIDENCE	State RI	Zip 02909	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILE 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 LOUIS BOURLOS		Manager Name			
Street Address 322 BROADWAY		Street Address			
City PROVIDENCE	State RI	Zip 02909	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 STEPHEN T. NAPOLITANO		Address			
Address 155 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 5 4 4 \*

**FILED**

File Date

NOV 07 2003

Check No.

By 1939 GAW

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.

*Louis Bourlos*  
Signature of Authorized Person  
Louis Bourlos

10/31/03

Date

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  
401.222.3046

# 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. <b>104544</b>		2. Exact name of the limited liability company <b>OCEAN STATE REALTY 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>TO BUY, MANAGE DEVELOP, FINANCE, RENT AND SELL REAL ESTATE</b>	
5. Principal office address <b>322 BROADWAY</b>		City <b>PROVIDENCE</b>	State <b>RI</b>
		Zip <b>02903</b>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name <b>LOUIS BOURLOS</b>		Contact Title <b>MANAGER</b>	
Street Address <b>322 BROADWAY</b>		City <b>PROVIDENCE</b>	State <b>RI</b>
		Zip <b>02903</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 <b>LOUIS BOURLOS</b>		Manager Name	
Street Address <b>322 BROADWAY</b>		Street Address	
City <b>PROVIDENCE</b>	State <b>RI</b>	City	State
Zip <b>02903</b>		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>STEPHEN T. NAPOLITANO</b>		Address	
Address <b>155 SOUTH MAIN STREET</b>		City <b>PROVIDENCE</b>	Zip <b>02903</b>

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



\* 1 0 4 5 4 4 \*

File Date	<b>FILED</b>
Check No.	<b>DEC 09 2002</b>
By	<b>BY [Signature]</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]** 10/30/02  
Signature of Authorized Person Date  
**Louis Bourlos**  
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 DLIC 104544

Annual Report for the year 2001

1. The name of the limited liability company is:

OCEAN STATE REALTY LLC

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

322 BROADWAY, PROVIDENCE, RI 02903

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: STEPHEN T. NAPOLITANO

155 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: STEPHEN T. NAPOLITANO, ESQ., 155 SOUTH MAIN

STREET, PROVIDENCE, RI 02903

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: to buy, manage, develop, finance, rent and sell real estate

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

Name

Address

LOUIS BOURLOS

322 BROADWAY, PROVIDENCE, RI 02903

Dated October, 2001



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.

OCEAN STATE REALTY LLC

Exact Name of Limited Liability Company

By

Louis Bourlos  
Louis Bourlos, Manager

Title

FOR SECRETARY OF STATE USE ONLY

File Date:

Check No.:

By:

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 DLIC 104544

Annual Report for the year 2000

1. The name of the limited liability company is:

OCEAN STATE REALTY LLC

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

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: STEPHEN T. NAPOLITANO

155 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: STEPHEN T. NAPOLITANO, 155 SOUTH MAIN STREET,  
PROVIDENCE, RI 02903

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: to buy, manage, develop, finance, rent and sell real estate

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

Name	Address
LOUIS BOURLOS	45 GOODNOW LANE, FRAMINGHAM, MA 01701

Dated October, 2000



1 0 4 5 4 4

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.

OCEAN STATE REALTY LLC

*Exact Name of Limited Liability Company*

By

Louis Bourlos, Manager

*Title*

FOR SECRETARY OF STATE USE ONLY

File Date: 11/6/2000

Check No.: 1028

By: AKB

Form No. 632  
Revised 01/99