



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 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 98348		2. Exact name of the limited liability company Alchemie Investments II, LLC		
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island INVESTING		
5. Principal office address 839-C MINISTERIAL ROAD		City WAKEFIELD	State RI	Zip 02879
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:				
Contact Name E. DAVID CORVESE		Contact Title		
Street Address 839-C MINISTERIAL ROAD		City WAKEFIELD	State RI	Zip 02879-
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 checked="" type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52				
Manager Name E. David Corvese		Manager Name		
Street Address 839-C Ministerial Road		Street Address		
City Wakefield	State RI	Zip 02879	City	State
Manager Name		Manager Name		
Street Address		Street Address		
City	State	Zip	City	State
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 C. BRUNS		Address 21 SURF DRIVE		
Address		City BRISTOL	Zip 02809-	

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



9 8 3 4 8

98348 DLLC 10/17/05 11:12:01 AM

File Date 10/24/05
Check No. 3096

By: CXC

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.

E. David Corvese 10/19/05
Signature of Authorized Person Date

E. David Corvese

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

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 98348		2. Exact name of the limited liability company Alchemie Investments II, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island INVESTING	
5. Principal office address 839-C MINISTERIAL ROAD		City WAKEFIELD	State RI Zip 02879
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name E. DAVID CORVESE		Contact Title .	
Street Address 839-C MINISTERIAL ROAD		City WAKEFIELD	State RI Zip 02879-
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 E. David Corvese		Manager Name .	
Street Address 839-C Ministerial Road		Street Address .	
City Wakefield	State RI	Zip 02879	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 C. BRUNS		Address 21 SURF DRIVE	
Address .		City BRISTOL	Zip 02809-

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



9 8 3 4 8

98348 DLLC 10/07/04 12:25:06 PM

File Date 10/18/04

Check No. 3023

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] 10-12-04
Signature of Authorized Person Date

E. David Corvese

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 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No 98348		2. Exact name of the limited liability company Alchemie Investments II, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island INVESTING	
5. Principal office address 839-C Ministerial Road		City Wakefield	State RI Zip 02879
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name E. David Corvese		Contact Title Manager	
Street Address 839-C Ministerial Road		City Wakefield	State RI Zip 02879
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 E. David Corvese		Manager Name	
Street Address 839-C Ministerial Road		Street Address	
City Wakefield	State RI	City	State Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State	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 C. BRUNS		Address	
Address 21 SURF DRIVE		City BRISTOL	Zip 02809-

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



File Date	<u>10/22/03</u>
Check No.	<u>2970</u>
By:	<u>[Signature]</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] 10/15/03
Signature of Authorized Person Date
E. David Corvese
E DAVID CORVESE
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. 98348		2. Exact name of the limited liability company Alchemie Investments II, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island INVESTING			
5. Principal office address 839-C Ministerial Road		City Wakefield	State RI	Zip 02879	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name E. David Corvese		Contact Title Manager			
Street Address 839-C Ministerial Road		City Wakefield	State RI	Zip 02879	
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 E. David Corvese		Manager Name			
Street Address 839-C Ministerial Road		Street Address			
City Wakefield	State RI	Zip 02879	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 C. BRUNS		Address			
Address 21 SURF DRIVE		City BRISTOL	Zip 02809		

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



File Date	10-25-02
Check No.	2904
By:	AMV
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 10/22/02
E. David Corvese
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 98348

Annual Report for the year 2001

1. The name of the limited liability company is:

Alchemie Investments II, LLC

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

839-C Ministerial Road, Wakefield, RI 02879

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 C. BRUNS

30 CUTLER STREET, SUITE 221 WARREN RI 02885

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: 839-C Ministerial Road, Wakefield, RI 02879

E. David Corvese, Manager

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: business investment and activities appropriate thereto

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

Name
E. David Corvese

Address
839-C Ministerial Road, Wakefield, RI 02879

Dated 10/23/01



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.

Alchemie Investments II, LLC

Exact Name of Limited Liability Company

By E. David Corvese

E. David Corvese

Manager

Title

Form No. 632
Revised 01/99

FOR SECRETARY OF STATE USE ONLY
File Date: 10-24-01

Check No.: 2831

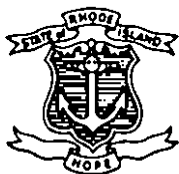
By: [Signature]

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 98348

Annual Report for the year 2000

1. The name of the limited liability company is:

Alchemie Investments II, LLC

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

839-C Ministerial Road, Wakefield, RI 02879

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 C. BRUNS

30 CUTLER STREET, SUITE 221 WARREN RI 02885

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: 839-C Ministerial Road, Wakefield, RI 02879

E. David Corvese

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Investing, and otherwise to engage in any and all business activities appropriate thereto

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

Name

Address

E. David Corvese

839-C Ministerial Road, Wakefield, RI 02879

Dated 10/17/00



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.

Alchemie Investments II, LLC

Exact Name of Limited Liability Company

By 

Manager

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 10-20-00

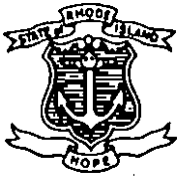
Check No.: 2717

By: AMF

Form No. 632
Revised 01/99

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 98348

Annual Report for the year 1999

1. The name of the limited liability company is:

Alchemie Investments II, LLC

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

839-C Ministerial Road, Wakefield, RI 02879

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 C. BRUNS

30 CUTLER STREET, SUITE 221 WARREN, RI 02885

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: 839-C Ministerial Road, Wakefield, RI 02879

E. David Corvese

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Investing, and otherwise to engage in any and all business activities

appropriate thereto

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

Name

Address

E. David Corvese

839-C Ministerial Road, Wakefield, RI 02879

Dated September 14, 1999



* 9 8 3 4 8 *

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.

Alchemie Investments II, LLC

Exact Name of Limited Liability Company

By [Signature]

Manager

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 9-27-99

Check No.: 2531

By: AMF

Form No. 632
Revised 01/99

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 98348

Annual Report for the year 1998

1. The name of the limited liability company is:

Alchemie Investments II, LLC

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

839-C Ministerial Road, Wakefield, RI 02879

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 C. BRUNS

1070 KINGSTOWN ROAD SOUTH KINGSTOWN, RI 02879

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: E. David Corvese, Manager, Alchemie Investments II, LLC

839-C Ministerial Road, Wakefield, RI 02879

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Investing and otherwise to engage in any and all business activities appropriate thereto.

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

Name
E. David Corvese

Address
839-C Ministerial Road, Wakefield, RI 02879

Dated September 17, 98



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.

Alchemie Investments II, LLC

Exact Name of Limited Liability Company

By [Signature]

Managing Partner
Title

FOR SECRETARY OF STATE USE ONLY

File Date: 9/24/98

Check No.: 0091

By: 1UP

Form No. LLC-19
Revised 8/97

DETACH BOTTOM BEFORE RETURNING