

# 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	
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Filing Period: September 1 - November 1 Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) 1. ID No 2. Exact name of the limited liability company 81457 CADILLAC MILLS LLC 3. State of Formation 4 Brief description of the character of the business which is actually conducted in Rhode Island LEASING OF WAREHOUSING & MANUFACTURING SPACE **RHODE ISLAND** 5. Principal office address CUMBERLAND 02864 DO MEETING STREET 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Title Schwartz MEMBER AS#5 Above State 240 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 lim Schwartz Street Address Street Address State 7.Ip Manager Name Street Address Street Address City State State Ζip 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11 Agent Name Address STEPHEN R. SCHWARTZ Address City Z.ip **172 CONGDON STREET** PROVIDENCE 02906

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



File Date 9/28/05 *81457*	
Check No. 4307	
ву:	_
FOR SECRETARY OF STATE USE ONLY	l

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

Stolen (Schnort Aug 30, 2005

StePHEN R SCHWARTZ

rint 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

IMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2	「Y COMPANY ANNUAL REPORT FOR THE YEAR
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FITTING PERSON: SO (FORM MUST BE 13	STED OR PRIN	TED IN BIACK)	• Filing Fee: \$50.00			<u> </u>	
I. ID No.		t name of the limited					
81457 3. State of Formatio		LLAC MILLS LLC	of the character of the hydroes	which is actually conducted in Rhode.	ldawl		
RHODE ISLAND LEASING OF WAREHOUSING & MAI			·	······			
5 Principal office a		<del></del>	· ·	City	State		Zip
30 MEETING ST.				CUMBERLAN	$\sim$	7	12864
			ITY COMPANY AND NA	ME OR TITLE OF CONTACT P	ERSON:	-1-	102301
Contact Name	1	_		Contact Title			
	chWart	2					
Siroci Addines 30 M.	eetinl	(1-		City Bank AACO	State O -	i	02864
	•			CUMBERLAND		_	102887
7. NAME AND A	ADDRESS OF			ABILITY COMPANY, IF APPLIC TACHMENTS <i>("X" BOX FOR</i>		n (C)	
	ANY MODI			FILING OF AMENDMENT, R.I.			6-52
Manager Name				Manager Name			
) M	SCHWA	BTZ					
Street Address				Street Address			
	1EETIN	<u>6 51 </u>					
CUM BER	<b>₩</b> 0	State 4	02864	CII)	State		Zip
Manager Name	Αί <b>Ψ.</b> Π	JI.S.:\ <del>L.</del>	10000	Manager Name		••••	. J
				, ranning v ranna			
Sinci Address		<del>-</del>	<del></del>	Stret Address			· · · · · · · · · · · · · · · · · · ·
		<del> </del>	<del></del>	_			
Clip		State	Zip	City	State		Zip
8. RESIDENT A	GENT IN RH	T ODE ISLAND - 1	l DO NOT ALTER - Chans	: ges require filing of Form 64	   2 - R.I.G.L. 7-1	6.11	1
Agent Name				Address			
STEPHEN R SC	WART T						
Address	-HWARIZ		·	City Zip			
172 CONGDON S	STREET			PROVIDENCE 02906			
172 CONGDON STREET			-	_   FROVIDENCE		1 02900	
		This report mu	st be siened in ink by an	authorized person pursuant to	R I G L. 7-16-0	56	
		,		The second secon		, ,	
		#   <b>                                   </b>	AI IAA:				

\* 8 1 4 5 7 \*

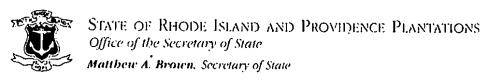
File Date 9 13 04

Check No. 3 9 7 9

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.
C	Stephen R. Schwart
	Signature of Authorized Person Rate
	V
	STEPHEN R SCHWARTZ
	Print or Type Name of Authorized Person



Corporations Division 100 North Main Street Providence, RI 02903-1335

rldence, RI 02903-1335 401.222,3010

### LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

2003

1 ID No	2. Exact name of the lin	itted Hability company			
81457	CADILLAC MI	LLS LLC			
3. State of Formation	4. Brief descri	otion of the character of the busines	s which is actually conducted in Rhode	· Island	<u> </u>
RHODE ISLAND	LEASING (	OF WAREHOUSING & MANU	FACTURING SPACE		
	ETING ST		Cumberland	State	02864
o, MAHANG AD. Contact Name	DRESS OF LIMITED LIA	BILITY COMPANY AND NA	ME OR TITLE OF CONTACT:	PERSON:	
Jim	SCHWARTZ		Contact Tule		
Sirvet Address A		<del></del>	Qity	State	Zin
30 ME	ETING ST		CUMBERLAND	I RI	02864
NAME AND A	DDRESS OF EACH MAN	AGER OF THE LIMITED LI	ABILITY COMPANY, IF APPL	ICABLE	
	FILL IN : ANY MODIFICATIONS	SPACES BEFORE USING AT TO MANAGERS REQUIRES	TACHMENTS ("X" BOX FO FILING OF AMENDMENT, R.	R ATTACHMENT) 🗌 LG L -7.16.12 (a) (2) /	7.16.52
lanager Name	_	**************************************	Manager Name	/ 10 12 (11) (2) /	7-10-92
Jim!	SCHWARTZ-				
Took Address 30 Me	15 ~		Street Address		
Combes	land "RI	×40 02 864	Chy	State	Zip
Manager Name			Manager Name	•••••••	· • • • • • • • • • • • • • • • • • • •
invi Addn×		<del>, ,</del> .	Street Address		
λip	State	Zlp	City	State	Zip
RESIDENT AC	TENT IN PHONE ISLANI	DONOTATES Cham	ges require filing of Form 6	(2	I
lgent Name	71.00 110 KITCAZI, 13134101	2;- DO NOT ALTER : Chang	Address	42 - K.I.G.I /-10-11	
TEPHEN R. SCH	WARTZ				
Address			City	Zip	
Iddress 172 CONGDON ST		PROVIDENCE 02906			

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

	* 8 1 4 5 7	*
File Date _	9-10-03	
Check No	3627	
By:	<u>C</u>	
FO	OR 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.

James	Duraly	9/9/03
Signature of Authorize	d Person	Date
Tonoc	D Exw	a Ft

Print or Type Name of Authorized Person



Check No.

FOR SECRETARY OF STATE USE ONLY

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

7. ID No. 81457	2 Exac	RINTED IN BLACK) CL name of the limited LLAC MILLS LLC	liabilty company			
3. State of Formation RHODE ISLANI	)n	4. Brief description of	of the character of the busin AREHOUSING & MANUF	ness which is actually conducted ACTURING SPACE	in Rhode Island	
5. Principal office of SO N	uddress leetma	St.		Cumberland	State KI	Zip 02864
Contact Name	_	1	BILITY COMPANY	Contact Title	OF CONTACT P	ERSON:
Street Address				Manager	State	Zip O O O C ( )
	eeting DDRESS	OF EACH MANAG	GER OF THE LIMIT	· Cumbertand ED LIABILITY COMPA		
Manager Name		ODIFICATIONS TO I	MANAGERS REQUIRES	FILING OF AMENDMENT. R	FOR ATTACHMEN) J.G.L 7-16-12 (a) (2	
JAME Street Address	<u>s D.</u>	JEHWAFT	<u> </u>	*Street Address		
30 City 1	Mal	Schwart ing St.	Zip : _ 11 D	*City	State	Zip
Manager Name	EN IDMA	)	2ip OLP64	Manuger Name		
Street Address				• Street Address		
City	·····	State	Zip	•City·	State	Zip
B. RESIDENT AC Igent Name STEPHEN R. SCHI		HODE ISLAND -D	O NOT ALTER- Chang	es require filing of Fo	rm 642 - R.I.G.L.	7-16-11
Address 172 CONGDON ST	REET			City- PROVIDENCE		72ip 02906
This report must	be signed	in ink by an aul	horized person pursu	iant to 7-16-66.		
	* 8	1 4 5 7 *	   		any accompanying	offirm that I have examined schedules and statements, are true and correct,
File Date	.4	-5-02		~ · · ·	-N -A	-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

₹ <u>₹</u>

Œ	Number	DLLC	81457
_			01701

Annual Report for the year 2001

	<del></del>	Amounteport for the year 2001
1.	The name of the limited liability comp	pany is:
	CADILLAC MILLS LLC	
2.	The address of the principal office of	the limited liability company is:
	30 Meeting Street Cu	mberland, RI 02864
3.	The state or other jurisdiction under	he laws of which it is formed is RHODE ISLAND
4.		t agent is: STEPHEN R. SCHWARTZ
	172 CONGDON STREET PROVIDE	
5.		nited liability company and the name or title of a person to whom communication
	may be directed are:	wartz 30 Meeting St. Cumberland, RI 02864
<ul><li>6.</li><li>7.</li></ul>	state: Industrial manufac	of the business in which the limited liability company is actually engaged in this turing & warehousing space for rent.  Inagers, the name and address of each manager of the limited liability company
	Name	Address
	Jim Schwartz	7 Brownstone Way Ho-Ho-Kus, NJ 07423
	Stephen Schwartz	172 Congdon St. Providence, RI 02906
Dat	ded Sept. 4, 2001	Under penalty of perjury, I declare and affirm that I have examined this
	8 1 4 5 7	report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  Cadillac Mills L.L.C.  Exact Name of Limited Liability Company
File	FOR SECRETARY OF STATE USE ONLY Date: 7-7-0	By Jim Jehurny Jim Schwartz
Chec By:	ck No.: 3144	Title Form No 632 Revised 01/99

DETACH BOTTOM BEFORE RETURNING

Filing Fee: \$50.00

By:

## To be filed annually between September 1 and November 1

Revised 01/99



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

ID	Number DLLC 81457	Annual Report for the year 2000
1.	The name of the limited liability com	ipany is:
	CADILLAC MILLS LLC	
2.	The address of the principal office of	f the limited liability company is:
	30 Meeting Street	Cumberland, RI 02864
3.	The state or other jurisdiction under	the laws of which it is formed is RHODE ISLAND
4.	The name and address of its reside	nt agent is: STEPHEN R. SCHWARTZ
	172 CONGDON STREET PROVID	ENCE RI 02906
5.	The current mailing address of the I	imited liability company and the name or title of a person to whom communication
	may be directed are:S. Schwa	artz 172 Congdon St. Providence, RI 02864
	state: Industrial Rea	of the business in which the limited liability company is actually engaged in this all Estate Rental anagers, the name and address of each manager of the limited liability company Address
	Jim Schwartz	30 Meeting St. Cumberland, RI 02864
Dat	8 1 4 5 7	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.  Cadillac Mills L.L.C.  Exact Name of Limited Liability Company
ile l	FOR SECRETARY OF STATE USE ONLY Date:	By Stephen 1. ) Mwany Member
Chec	ck No.: 2859	Title Form No. 632

## 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

ID	Number <u>LL 81457</u>	Annual Report for the year 1999
1.	The name of the limited liability com	pany is:
2		(AL - P - A - A P - 1 PA
2:	The address of the principal office o	tine limited liability company is:  Cumberland, RI 02864
3.	-	the laws of which it is formed is RHODE ISLAND
4.		nt agent is: STEPHEN R. SCHWARTZ
	172 CONGDON STREET PROVID	
5.		mited liability company and the name or title of a person to whom communications
		ng Street Cumberland, RI 02864
		vartz Bldg. Manager
6.		of the business in which the limited liability company is actually engaged in this
		arehouse and industrial space.
7.	If the limited liability company has ma Name	anagers, the name and address of each manager of the limited liability company  Address
	-Jim Schwartz	7 Brownstone Way Ho-Ho-Kus, NJ 07423
Dat	ed <u>Sept. 20, 1999</u>	Under penalty of perjury, I declare and affirm that I have examined this
	* 8 1 4 5 7 *	report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  CADILIAC MILLS L.L.C.  Exact Name of Limited Liability Company
File	FOR SECRETARY OF STATE USE ONLY Date: / 0_ W = 99	By Stephen R. Schwartz
Chec	k No.: 1482	Momber
By:	AMF	Form No. 632 Revised 01/99

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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

ID	Number LL 81457	Annual Report for the year 1998
1.	The name of the limited liability compa	any is:
	CADILLAC MILLS LLC	
2.	The address of the principal office of t	he limited liability company is:
	30 Meeting Str	eet, Cumberland, RI 02864
3.	The state or other jurisdiction under the	e laws of which it is formed is RHODE ISLAND
4.	The name and address of its resident	agent is: STEPHEN R. SCHWARTZ
	172 CONGDON STREET PROVIDE	NCE, RI 02906
5.	The current mailing address of th	e limited liability company and the name or title of a person to whom
	communications may be directed are:	30 Meeting Street, Cumberland, RI 02864
	Attn: James Schwartz	, Property Manager
6.	A brief statement of the character of	the business in which the limited liability company is actually engaged in this
	state: Leasing of indust	rial & warehousing space.
7.	If the limited liability company has ma	nagers, the name and address of each manager of the limited liability company  **Address**
	James D. Schwartz	7 Brownstone Way, Ho-Ho-Kus, NJ 07423
Do		Under penalty of perjury, I declare and affirm that I have examined this
υa	September 14, 1990	report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
	* 8 1 4 5 7 *	CADILLAC MILLS L.L.C.  Exact Name of Limited Liability Company
	POR SECRETARY OF STATE USE ONLY Date: 9.33.98	210(11
Che	ck No.: 3130	By Stephen R. Schwartz Stylin / Mworly
Ву:	UP	Resident Agent Title

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

#### LIMITED LIABILITY COMPANY

ID	Number0081457	Annual Report for the year1997	
1.	The name of the limited liability company is	<b>5</b> :	
2.	The address of the principal office of the limited liability company is:  30 Meeting Street Cumberland, RI 02864		
3. 4.	•	t is:Stephen R. Schwartz	
5.	<u>-</u>	ited liability company and the name or title of a person to whom	
	communications may be directed are: 30 Mosting Street, Cumberland, RI 02864  James Schwartz, Property Manager		
6.	A brief statement of the character of the business in which the limited liability company is actually engaged in this state:  Rental of Warehouse and Manufacturing Industrial Space		
7.	If the limited liability company has mana company  Name	gers, the name and address of each manager of the limited liability  Address	
	James Schwartz	7 Brownstone Way Ho-Ho-Kus, NJ 07423	
Da	ted <u>August 26</u> , <b>19</b> 97	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.	
	SEP 0 8 1997 SECY OF SECY OF S	Exact Name of Limited Liability Company  By James D. Schwartz  Property Manager  Title	

Form No. LLC-19 Revised 8/97

#### State of Rhode Island and Providence Plantations

Office of the Secretary of State Corporation Division 100 North Main Street Providence, RI 02903-1335

#### LIMITED LIABILITY COMPANY

LLC I.D # 81457		Annual Report for the year 1996			
FIRST:	The name of the limited liability	y company is. CADILLAC MILLS LLC			
SECOND:	The address of the principal of	ffice of the limited liability company is:			
	30 Meeting Street	t, Cumberland, RI 02864			
THIRD:	The state or other jurisdiction	under the laws of which it is formed is: Rhode Island			
FOURTH:	The name and address of its i	resident agent is:			
	Stephen R. Schwart	tz 172 Congdon Street, Providence, RI 02906			
FIFTH:	The current mailing address of the limited liability company and the name or title of a person to who communications may be directed are.				
	James D. Schwarz	z 30 Meeting Street, Cumberland, RI 02864			
SIXTH	TH: A brief statement of the character of the business in which the corporation is actually engaged in this state:  Rental of warehouse and manufacturing space.				
Dated 요합	otember   2 , 19 96	Gadillac Mills L.L.C.  Exact Name of Limited Liability Company			
File Date	10 1	By Stephen & Schwarth			
Check No:	<u> </u>	To be signed in the manner required by the home state			
Ву		TitleMEMBER			
For Seco	retary of State Use Only	ing			

FORM LLC-19 7/95

But in Substitute and in the Manager And Andrew And Andrew Andrew

STEPHEN R. SCHWARTZ 172 CONGDON STREET PROVIDENCE, RI 02906

#### State of Rhode Island and Providence Plantations

Office of the Secretary of State Corporation Division 100 North Main Street Providence, RI 02903-1335

LLC 1.D. #	0061457	Annual Report for the year	1995	
FIRST:	The name of the limited liabi			
SECOND:		office of the limited liability company is:		
THIRD:	·	n under the laws of which it is formed is:		
FOURTH:	The name and address of its resident agent is: Stephen R. Schwartz			
FIFTH:	172 Congdon Street. Providence. RI 02906  FIFTH: The current mailing address of the limited liability company and the name or title of communications may be directed are:  30 Meeting Street, Cumberland, RI 02864			
	Attn: James Sch			
<b>SIX</b> TH:	state:	enacter of the business in which the corporation is actually enactions and manufacturing space.		
DatedSepte	ember 6 , 1995	CADILLAC MILLS L.L.C.  Exact Name of Limited Liability Compa		
	FILED SEP 2 7 1995	By Stephen 1. Schwart Title Member		
	<b>慰 (CC 33706</b> )			

<sup>\*</sup>To be signed in the manner required by the home state.