



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 95357		2. Name of Corporation Bradley Real Estate Holding Group, Inc.			
3. Street Address Principal Business Office PO BOX 1435		City NORTH SMITHFIELD		State RI	Zip 02896-
4. Business Phone No.		5. State of Incorporation RHODE ISLAND			6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island TO DEVELOP, INVEST IN AND HOLD TITLE AND OWNERSHIP IN REALESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS					
President Name Bradley LaFontaine		Vice President Name Bradley LaFontaine			
Street Address 915 Sherman Farm Road		Street Address 915 Sherman Farm Road			
City Harrisville	State RI	Zip 02830	City Harrisville	State RI	Zip 02830
Secretary Name Bradley LaFontaine		Treasurer Name Bradley LaFontaine			
Street Address 915 Sherman Farm Road		Street Address 915 Sherman Farm Road			
City Harrisville	State RI	Zip 02830	City Harrisville	State RI	Zip 02830
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS					
Director Name Bradley LaFontaine		Director Name			
Street Address 915 Sherman Farm Road		Street Address			
City Harrisville	State RI	Zip 02830	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 COMM NO PAR VALUE			500	COMMON	NO PAR

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



9 5 3 5 7

95357 DBC 02/03/05 06:12:43 PM

File Date _____

Check No. _____

By: Matthew A. Brown

FOR SECRETARY OF STATE USE ONLY

By: [Signature]

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.

Bradley LaFontaine 2/3/05
Signature of Officer Date
Bradley LaFontaine
Print or Type Name of Officer
PRESIDENT
Title of Officer



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 95357		2. Name of Corporation Bradley Real Estate Holding Group, Inc.			
3. Street Address Principal Business Office PO BOX 1435			City NORTH SMITHFIELD	State RI	Zip 02896-
4. Business Phone No.		5. State of Incorporation RHODE ISLAND			6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island TO DEVELOP, INVEST IN AND HOLD TITLE AND OWNERSHIP IN REALESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Bradley LaFontaine			Vice President Name Bradley LaFontaine		
Street Address 915 Sherman Farm Road			Street Address 915 Sherman Farm Road		
City Harrisville	State RI	Zip 02830	City Harrisville	State RI	Zip 02830
Secretary Name Bradley LaFontaine			Treasurer Name Bradley LaFontaine		
Street Address 915 Sherman Farm Road			Street Address 915 Sherman Farm Road		
City Harrisville	State RI	Zip 02830	City Harrisville	State RI	Zip 02830
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Bradley LaFontaine			Director Name		
Street Address 915 Sherman Farm Road			Street Address		
City Harrisville	State RI	Zip 02830	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 COMM NO PAR VALUE			500	COMMON	NO PAR VALUE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



9 5 3 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.

Signature of Officer

Date

Print or Type Name of Officer

Title of Officer

95357 DBC 01/10/04 10:55:14 AM

File Date

Check No.

By:

FOR SECRETARY OF STATE USE ONLY

Form 630 12/01



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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

95357

Bradley Real Estate Holding Group, Inc.

3. Street Address Principal Business Office

City

State

Zip

PO Box 1435

N. Smithfield

RI

02896

4. Business Phone No.

5. State of Incorporation

6. SIC Code

RHODE ISLAND

5538

7. Brief Description of the Character of Business Conducted in Rhode Island

Develop invest in and hold title and ownership in real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

Bradley LaFontaine

Bradley LaFontaine

Street Address

Street Address

915 Sherman Farm Rd.

915 Sherman Farm Rd.

City

State

Zip

City

State

Zip

Harrisville

RI

02830

Harrisville

RI

02830

Secretary Name

Treasurer Name

Bradley LaFontaine

Bradley LaFontaine

Street Address

Street Address

915 Sherman Farm Rd.

915 Sherman Farm Rd.

City

State

Zip

City

State

Zip

Harrisville

RI

02830

Harrisville

RI

02830

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Bradley LaFontaine

Street Address

Street Address

915 Sherman Farm Rd.

City

State

Zip

City

State

Zip

Harrisville

RI

02830

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

500 COMM NO PAR VALUE

-0-

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 5 3 5 7 *

File Date: 3-11-03

Check No.: 23899

By: ICP

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.

Bradley LaFontaine 3/10/03
Signature of Officer Date
BRADLEY LAFONTAINE
Print or Type Name of Officer

President
Title of Officer



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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

95357

2. Name of Corporation

Bradley Real Estate Holding Group, Inc.

3. Street Address Principal Business Office

PO Box 1435

City

State

Zip

N. Smithfield

RI

02896

4. Business Phone No.

5. State of Incorporation

6. SIC Code

RHODE ISLAND

5538

7. Brief Description of the Character of Business Conducted in Rhode Island

Develop, invest in and hold title and ownership in real estate

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Bradley LaFontaine

Street Address

915 Sherman Farm Rd.

City

State

Zip

Harrisville

RI

02830

Vice President Name

Bradley LaFontaine

Street Address

915 Sherman Farm Rd.

City

State

Zip

Harrisville

RI

02830

Secretary Name

Bradley LaFontaine

Street Address

915 Sherman Farm Rd.

City

State

Zip

Harrisville

RI

02830

Treasurer Name

Bradley LaFontaine

Street Address

915 Sherman Farm Rd.

City

State

Zip

Harrisville

RI

02830

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Bradley LaFontaine

Street Address

915 Sherman Farm Rd.

City

State

Zip

Harrisville

RI

02830

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

500 COMM NO PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

-0-

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 5 3 5 7 *

File Date: 3-5-02

Check No.: 20248

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 of Officer

Date

Print or Type Name of Officer

Title of Officer

5

Form 630 12/01



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **95357** 2. Name of Corporation **Bradley Real Estate Holding Group, Inc.**
3. Street Address Principal Business Office **435 Wood Avenue** City **Woonsocket** State **RI** Zip **02895**
4. Business Phone No. _____ 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island

Develop, invest in add hold title and ownership in real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Bradley LaFontaine Street Address 915 Sherman Farm Rd. City Harrisville State RI Zip 02830	Vice President Name Bradley LaFontaine Street Address 915 Sherman Farm Rd. City Harrisville State RI Zip 02830
Secretary Name Bradley LaFontaine Street Address 915 Sherman Farm Rd. City Harrisville State RI Zip 02830	Treasurer Name Bradley LaFontaine Street Address 915 Sherman Farm Rd. City Harrisville State RI Zip 02830

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Bradley LaFontaine Street Address 915 Sherman Farm Rd. City Harrisville State RI Zip 02830	Director Name Street Address City _____ State _____ Zip _____
Director Name Street Address City _____ State _____ Zip _____	Director Name Street Address City _____ State _____ Zip _____

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
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500 COMM NO PAR VALUE

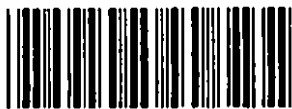
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
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-0-

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee.



* 9 5 3 5 7 *

File Date: 3-9-01

Check No.: 16939

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] 3/1/01
Signature of Officer Date

Bradley LaFontaine
Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **95357** 2. Name of Corporation **Bradley Real Estate Holding Group, Inc.**
3. Street Address Principal Business Office City State Zip
435 Wood Avenue Woonsocket RI 02895
4. Business Phone No. 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island

Develop, invest in and hold title and ownership in real estate

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name

Bradley LaFontaine

Street Address

915 Sherman Farm Rd.

City State Zip
Harrisville RI 02830

Secretary Name

Bradley LaFontaine

Street Address

915 Sherman Farm Rd.

City State Zip
Harrisville RI 02830

Vice President Name

Bradley LaFontaine

Street Address

915 Sherman Farm Rd.

City State Zip
Harrisville RI 02830

Treasurer Name

Bradley LaFontaine

Street Address

915 Sherman Farm Rd.

City State Zip
Harrisville RI 02830

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name

Bradley LaFontaine

Street Address

915 Sherman Farm Rd.

City State Zip
Harrisville RI 02830

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

Director Name

Street Address

City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

500 COMM NO PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares Class/Series Par Value

-0-

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 5 3 5 7 *

File Date: 3/2/00

Check No.: 13756

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 of Officer

Date

Print or Type Name of Officer

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 95357		2. Name of Corporation Bradley Real Estate Holding Group, Inc.	
3. Street Address Principal Business Office 435 Wood Avenue		City Woonsocket	State RI
4. Business Phone No.		5. State of Incorporation RHODE ISLAND	Zip 02895
6. SIC Code 5538		7. Brief Description of the Character of Business Conducted in Rhode Island Develop, invest in and hold title and ownership in real estate	
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Bradley LaFontaine		Vice President Name Bradley LaFontaine	
Street Address 915 Sherman Farm Rd.		Street Address 915 Sherman Farm Rd.	
City Harrisville	State RI	City Harrisville	State RI
Zip 02830		Zip 02830	
Secretary Name Bradley LaFontaine		Treasurer Name Bradley LaFontaine	
Street Address 915 Sherman Farm Rd.		Street Address 915 Sherman Farm Rd.	
City Harrisville	State RI	City Harrisville	State RI
Zip 02830		Zip 02830	
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Bradley LaFonaine		Director Name	
Street Address 915 Sherman Farm Rd.		Street Address	
City Harrisville	State RI	City	State
Zip 02830		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
500 COMM NO PAR VALUE			
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
-0-			

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 5 3 5 7 *

File Date: **03-26-99**

Check No.: **10869**

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] **3/24/99**
Signature of Officer Date

Bradley LaFontaine
Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1998**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 95357		2. Name of Corporation Bradley Real Estate Holding Group, Inc.	
3. Street Address Principal Business Office 435 Wood Avenue		City Woonsocket	State RI
4. Business Phone No.		5. State of Incorporation RHODE ISLAND	Zip 02895
6. SIC Code 5538			
7. Brief Description of the Character of Business Conducted in Rhode Island To develop invest in and hold title and ownetship in real estate			
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)			
President Name Bradley LaFontaine		Vice President Name Bradley LaFontaine	
Street Address 915 Sherman Farm Rd.		Street Address 915 Sherman Farm Rd.	
City Harrisville	State RI	City Harrisville	State RI
Zip 02830		Zip 02830	
Secretary Name Bradley LaFontaine		Treasurer Name Bradley LaFontaine	
Street Address 915 Sherman Farm Rd.		Street Address 915 Sherman Farm Rd.	
City Harrisville	State RI	City Harrisville	State RI
Zip 02830		Zip 02830	
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)			
Director Name Bradley LaFontaine		Director Name	
Street Address 915 Sherman Farm Rd.		Street Address	
City Harrisville	State RI	City	State
Zip 02830		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)			
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
500 COMM NO PAR VALUE		-0-	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



3-11-98

File Date: _____

Check No.: _____

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.

Signature of Officer
BRADLEY LAFONTAINE
Print or Type Name of Officer
President
Date **3-6-98**
Title of Officer