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.	*2. Exact name of the limited liability company*
144362	Home Selling Team LLC

3. State of Formation	*4. Brief description of the character of the business which is actually conducted in Rhode Island*
RHODE ISLAND	REAL ESTATE SALES

5. Principal office address	*City*	*State*	*Zip*
93 CONANTVille RD.	MANSFIELD	CT	06250

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	*Contact Title*
BRIAN McCARTHY	MEMBER

Street Address	*City*	*State*	*Zip*
93 CONANTVille RD.	MANSFIELD	CT	06250

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	*Street Address*	*City*	*State*	*Zip*
Manager Name	*Street Address*	*City*	*State*	*Zip*
Manager Name	*Street Address*	*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	*Address*	*City*	*Zip*
PARASEARCH, INC.	222 JEFFERSON BOULEVARD, SUITE 200	WARWICK	02888

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
05 OCT -3 PM 1:24

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

[redacted] [redacted]

144362

File Date FILED
Check No. OCT 03 2005
By: By 98695
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.

B S. McCarthy 9/28/05
Signature of Authorized Person *Date*

BRIAN McCARTHY
Print or Type Name of Authorized Person

[redacted]

Form 632 Rev. 7/03