



**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. 104668		2. Exact name of the limited liability company The Gurnet Group, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island BUSINESS/ TECHNICAL CONSULTING			
5. Principal office address 17 Huntington Dr.		City Rumford	State RI	Zip 02916	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name MARTIN J. KING			Contact Title PRES / CEO		
Street Address 17 Huntington Dr.		City Rumford	State RI	Zip 02916	
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 MARTIN J. KING			Manager Name		
Street Address 17 Huntington Dr.		Street Address			
City Rumford	State RI	Zip 02916	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 MARTIN J. KING, JR.			Address 17 HUNTINGTON DRIVE		
Address P.O. BOX 16321		City RUMFORD		Zip 02916	

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



File Date	11/22	*104668*
Check No.	2086	
By:	<i>[Signature]</i>	
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]* 11/19/05  
 Signature of Authorized Person 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 02903-1335  
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. 104668		2. Exact name of the limited liability company The GURNET GROUP, LLC	
3. State of Formation RI		4. Brief description of the character of the business which is actually conducted in Rhode Island Business / Tech Consulting	
5. Principal office address 17 Huntington Dr #100		City E. Prov	State RI
		Zip 02916	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name MARTIN J. KING		Contact Title President / CEO	
Street Address PO Box 16321		City E. Prov	State RI
		Zip 02916	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS (*X* BOX FOR ATTACHMENT) IN THIS SECTION ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52			
Manager Name MARTIN J. KING		Manager Name	
Street Address 17 Huntington Dr		Street Address	
City E. Prov	State RI	City	State
	Zip 02916		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 MARTIN J. KING		Address 17 Huntington Dr	
Address PO Box 16321		City E. Prov	State RI
		Zip 02916	

05 JAN -4 PM 2:44

04 DEC 20 PM 3:56  
SECRETARIES DIV  
05 JAN 28 PM 1:10

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

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>FILED</b>
File Date JAN 28 2005
Check No. By M56824
By: <u>M56824</u>
FOR SECRETARY OF STATE USE ONLY

[Signature] 12/17/04  
Signature of Authorized Person Date  
MARTIN J. KING  
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. <u>104668</u>		2. Exact name of the limited liability company <u>The GURNET GROUP, LLC</u>	
3. State of Formation <u>RI</u>		4. Brief description of the character of the business which is actually conducted in Rhode Island <u>Business / Tech Consulting</u>	
5. Principal office address <u>17 Huntington Dr. #100</u>		City <u>E. Prov</u>	State <u>RI</u>
		Zip <u>02916</u>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name <u>MARTIN J. KING, JR.</u>		Contact Title <u>PRESIDENT / CEO</u>	
Street Address <u>PO Box 16321</u>		City <u>E. Prov</u>	State <u>RI</u>
		Zip <u>02916</u>	
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 checked="" type="checkbox"/> <b>ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52</b>			
Manager Name <u>MARTIN J. KING</u>		• Manager Name	
Street Address <u>17 Huntington Dr.</u>		• Street Address	
City <u>E. Prov</u>	State <u>RI</u>	Zip <u>02916</u>	• City
• State		• State	
• Zip		• Zip	
Manager Name		• Manager Name	
Street Address		• Street Address	
City	State	Zip	• City
• State		• 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 <u>MARTIN KING</u>		Address <u>17 Huntington Dr.</u>	
Address Eg <u>170 Box 16321</u>		City <u>E. Prov</u>	Zip <u>02916</u>

05 JAN 04 PM 2:43

04 DEC 20 PM 3:08  
SECRETARY OF STATE  
CORPORATIONS DIV  
11:50 AM  
12/28 PM 1:40

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

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] 12/17/04  
Signature of Authorized Person Date  
MARTIN J. KING  
Print or Type Name of Authorized Person

<b>FILED</b>
File Date <u>JAN 28 2005</u>
Check No. _____
By: <u>M56834</u>
FOR SECRETARY OF STATE USE ONLY <u>gdp</u>



**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. 104668		2. Exact name of the limited liability company The Gurnet Group, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island BUSINESS/ TECHNICAL CONSULTING	
5. Principal office address 17 Huntington Dr.		City E. Providence	State RI
		Zip 02916	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name MARTIN J. KING		Contact Title PRES / CEO	
Street Address 17 Huntington Dr.		City Rumford	State RI
		Zip 02916	
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 MARTIN J. KING		Manager Name	
Street Address 17 Huntington Dr.		Street Address	
City E. Prov.	State RI	Zip 02916	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 MARTIN J. KING, JR.		Address 17 HUNTINGTON DRIVE	
Address P.O. BOX 16321		City RUMFORD	Zip 02916

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



\* 1 0 4 6 6 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.

File Date: 4-18-03  
Check No.: 13971  
By: [Signature]  
FOR SECRETARY OF STATE USE ONLY

[Signature]  
Signature of Authorized Person  
Date: 4/17/03  
MARTIN J. KING  
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

LIMITED LIABILITY COMPANY

ID Number 104668

Annual Report for the year 2001

1. The name of the limited liability company is:

The GURNET GROUP, LLC

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

17 Huntington Dr. Rumford RI 02916

3. The state or other jurisdiction under the laws of which it is formed is:

RI

4. The name and address of its resident agent is:

MARTIN J. KING JR  
17 Huntington Dr. Rumford RI 02916

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:

PO BOX 16321  
E. Providence RI 02916

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

Business / Technical Consulting

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

Name	Address
<u>MARTIN KING JR</u>	<u>17 Huntington Dr.</u>
	<u>E. Providence RI</u>
	<u>02916</u>

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.

Date: 9/1/00

The GURNET GROUP, LLC  
Exact Name of Limited Liability Company

9-5-01  
CU # 1193  
2

By [Signature]  
President / CEO  
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 Number 104668

Annual Report for the year 2000

1. The name of the limited liability company is:

The GURNET GROUP, LLC

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

17 Huntington Dr. Rumford RI 02916

3. The state or other jurisdiction under the laws of which it is formed is:

RI

4. The name and address of its resident agent is:

MARTIN T. KING JR

17 Huntington Dr. Rumford RI 02916

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:

PO BOX 16321

E. Providence RI 02916

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

Business / Technical Consulting

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

Name	Address
<u>MARTIN KING</u>	<u>17 Huntington Dr.</u>
	<u>E. Providence RI</u>
	<u>02916</u>

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.

Date: 9/1/00

The GURNET GROUP, LLC  
Exact Name of Limited Liability Company

By [Signature]  
President / CEO  
Title