

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

Matthew A. Brown, Secretary of State

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

ovldence, RI 02903-1335 401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR ______ 2005

Filling Period: Septed (FORM MUST BE TYPED			Filing Fee: \$50.00				
1 ID No			ame of the limited Hability company				
86373	GRAHA	M DEVELOPMENT	DEVELOPMENT COMPANY, LLC				
3. State of Formation		4. Brief description of th	e character of the business wh	oich is actually conducted in Rhe	vie Island		<u> </u>
RHODE ISLAND		REAL ESTATE.		, , , , , , , , , , , , , , , , , , , ,			
5. Principal office address 19-B	Kask	Industri		Greenville of Contact	e suno	I	²⁴⁰ 02828
contact same .	rah		COMPANT AND NAME	Contact Title	r Person:		
Since Address 19-B L	ark	Indust	rial Parkway	Greenvill	e simo R	ユ	02828
7. NAME AND ADDI	RESS OF	EACH MANAGER (OF THE LIMITED LIAB	LITY COMPANY, IF APP	LICARI F		1
		FILL IN SPACES	BEFORE USING ATTAC	CHMENTS ("X" BOX FO ING OF AMENDMENT, F	OR ATTACHASEN	r) []	.52
Manager Name Navid	0	aham		Manager Name		-, (-, , , , , , ,	
5 Blue	<u> </u>	y hane		Sinvi Addns			
Tohnsto	\sim	Zilac RII	02919	Cuy	State		Zip
Manager Name Jud	G	raham		Manager Name	······································	••••••••	·····
5 Blue	ber	ry Lan	ಲ	Street Address	· -		
Johnston		state RI	02919	City	State	-	Zф
8. RESIDENT AGENT Agent Name	IN RHO	DE ISLAND - DO N	OT ALTER - Changes	require filing of Form (Address	642 - R.I.G.L. 7-1	16-11	
JUDI GRAHAM							
Addnss				City		Zip	
19-8 LARK INDUSTRIAL	L PARKW	AY		GREENVILLE		02828-	

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

File Date	10	24/05	*86373*
Check No.		190	
Ву:		CXC	
`	FOR SEC	CRETARY OF STATE	E 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.

Six alue of Authorized Person

<u>10-21-05</u>

Signature of Authorized Person

Date

Print or Type Name of Authorized Person



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

Matthew A. Brown, Secretary of State

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

(FORM MIJST HE TY						
I ID No	2 Exact name of the limit	ed Itability company				
86373	GRAHAM DEVELOR	MENT COMPANY, LLC				
3 State of Formatton	a 4 Brief description	on of the character of the busine	ss which is actually conducted	va titu i i i i		<u>.</u>
RHODE ISLAN	ID REAL ESTA	NTE.	· · · · · · · · · · · · · · · · · · ·	m kinka: Island		
5. Principal office at		<u> </u>				
19-	B LANG No	A t. i. o Q. a	City gla	Of State	2 T	Ztp
6. MAILING ADJ	DRESS OF LIMITED LIABI	LITY COMPANY AND N	way stlenu	the 1	<u>الم</u> لم	02828
Contact Name	lidi Shaham		AME OR TITLE OF CON	TACT PERSON:		
	uu xuuum		Mana	901		
Sinvi Address	19-2 lan		City	State		
	" I O " MUK JA	ndustrial Park	way Sheering	00. 1 /	$Q \top$	02828
· NAME AND A	DDRESS OF EACH MANAC	GER OF THE LIMITED TO	IARM ITY COMPANY TO	APPLICABLE		1 0 202 0
	FILL IN SP/ ANY MODIFICATIONS TO	ACES BEFORE USING AT	TACHMENTS ("X" BC	X FOR ATTACHM	ENT) 🗆	
lactive Name	10,000	MANAGERS REQUIRES	FILING OF AMENDMEN	T. R L G 1 7.16 1	2 (-) (2) (-	116.50
ng age same	4		:		2 (a) (2) / 7	·10·52
David	1. Graham		Managor Name	, , , , , , , , , , , , , , , , , , , ,	2 (a) (2) / 7	-10-52
Warid	1 Graham		Menager Name		z (a) (2) / 7	-10-52
Warid	L Graham	Q .			2 (a) (2) / 7	
Warid	L Graham ueberry Lan	e	Menager Name Street Address		2 (a) (2) / 7	
Warid	Laraham ueberu Lar	e 02919	Menager Name	State	2 (a) (2) / 7	Zip
Warid	Laraham ueberu Lar	Q Zw	Menager Name Street Address City		2 (a) (2) / 7	
Maind 5 Bl white white	Laraham ueberu Lar	Q Zw	Menager Name Street Address		2 (a) (2) / 7	
weet statistics Bl	Laraham ueberu Lar	e 02919	Menager Name Street Address City		2 (a) (2) / 7	
inext Address	Lebery dan weberny dan Mi Shaham Sueberny d	e 02919 ane	Manager Name Street Address City Manager Name Street Address		2 (a) (2) / 7	
Jaines Sulling	Lebery dan vebery dan Sin RI di Staham bueberny d on Sian RI	e Zip D2919 ane Zip D2919	Menager Name Street Address City Miniager Name Street Address Guy	State State		
To Aldress	Lebery dan vebery dan Sin RI di Staham bueberny d on Sian RI	e Zip D2919 ane Zip D2919	Menager Name Street Address City Miniager Name Street Address Guy	State State		Zip
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Treet Address Black of Sume	Lebery dan vebery dan Sin RI di Staham bueberny d on Sian RI	e Zip D2919 ane Zip D2919	Short Address City Manager Name Short Address Guy cs require filing of For	State State	7-16-11	Zip
Jaines Julies Bl in John to interest Name Ju- pres Addyrss in John to	Lebery dan Sul RI di Staham Sul RI Maham Sul RI Sul Ri	e Zip D2919 ane Zip D2919	Manager Name Street Address City Manager Name Street Address Guy es require filling of For	State State		Zip

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

	* 8 6 3 7 3 *
	FILED
Sile Date	SEP-2-1-2004
Check No	3y 194
By:	CC 140
POR SI	CRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and af including any accompanying schedules at contained herein are true and correct.	firm that I have examined this report, and statements, and that all statements.
Signature of Authorized Person	9-17-04
organia e of Authorizea Person	Dute

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

try of State Providence

Corporations Division 100 North Main Street Providence, RL0,963-1335 401-222 3046

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR ________ 2003

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

(FORM MUST BE TYP)	ED OR PRINTED IN BLACK)			— -
86373	GRAHAM DEVELOPMENT COMPANY	110		
2. State of Learning in	a Brast description of the character of the	pusiness which is actually conducted in 18 ode 18.		
RHODE ISLAND	REAL ESTATE.	to the state of the state of the state of	and	
9-B	air Industrial Harker	my Steenistle	Sur QJ	02828
Short Ad hos	RESS OF LIMITED LIABILITY COMPANY AN	DOME OR TITLE OF CONTACT PER Commerc Lade Manager		1
19-B) X	oress of Each Manager of the Limite	cy diag.	Marc C	02828
Ai	FILL IN SPACES BEFORE USING MODIFICATIONS TO MANAGERS REQUI	D-GIABILITY COMPANY, IF APPLICA G ATTACHMENTS — ("X" BOX FOR A RES FILING OF AMENDMENT, R.I.G.	BLE TTACHMENT) [] L 7.16-12 (5) (2)	/ = a / a .
David &	Iraham	Menigo Ama	/-10-12 (a) (2)	7 7-16-52
5 Bluly	inglani	Stort Address		
Kratin	() Sum QJ 2919	C_{i}^{i}	State	Zp
The distriction of	Iraham	Manager Name		
<u> 1)5 (x</u>	Shieling Lane	Steer Address		
Thiston	Jun QJ 77 02919	Gr.	Marc	Z10
JUDI GRAHAM	T IN RHODE ISLAND - DO NOT ALTER - CI	tanges require filing of Form 642.	1 R.I.G.L. 7-16-11	I
177755 19-B LARK INDUSTRIA	AL PARKWAY	GREENVILLE	×φ 0282	

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

	* 8 6 3 7 3	
'de Date	10.17.03	
Twek No = =	/// 	
1. – – – - FOR	CSECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affi including any accompanying schedules and contained herein are true and correct	rm that I have examined this report. I statements, and that all statements,
Kidi Shaham	10-16-03
Signature of Authorized Person Tudy Graham Print or Type Name of Authorized Person	Date
Trut or Type Name of Authorized Person	



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 Filing Period: September 1 - November 1 • Filing Fee: \$50.00 2002

(FORM MUST BE T	YPED OR PRINTED IN BL	r ung Fee: \$50.0	0		
[I. ID No.	2. Exact name of the lin	nited liabilty company			
86373	_ GRAHAM DEVELOP	MENT COMPANY, LLC			<u> </u>
3. State of Formation	4. Brief descrip	tion of the character of the bu	siness which is actually cor	iducted in Rhode Island	
RHODE ISLAND	REAL ESTA	ITE.	,		
5. Principal office ac	ldnyss		17%		
	& Industrial	Parkway	cirenril	State 7	D2828
Contact Name	DRESS OF LIMITED	LIABILITY COMPANY	AND NAME OR TO	TLE OF CONTACT PE	02300
Jud	i Draham		Contact Title	and all	KSON:
Street Address (\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		F: 0 () 0	City	1 1800	
3/1	D Time Indus	trial Parkway	مراحم	will Sinio I	Zip 02828
7. NAME AND AD	DRESS OF EACH MA	NAGER OF THE LIMIT	ED LIABILITY CO	MPANY, IF APPLICABLE	
Manager Name	ANT MODIFICATIONS	TO MANAGERS REQUIRES	FILING OF AMENDME	BOX FOR ATTACHMENT NT. R.I.G.L 7-16-12 (a) (2) /	7-16-52
_ (David &	haham		• Manuger Named	di drala	
Street Address	1		· Street Address	O	<u> </u>
Cir. A. O	very same		: 5	Blueberry -	lane.
Fristo	$\mathbb{R}^{ State} \mathbb{R}^{ State}$	102919	City of Presto	State	Zip 0 29 19
Manakel Name			Manage Name	······································	
Street Address			_ •		
•			Street Address		
City	State	Zip	City		
			•	State	Zip
3. RESIDENT AGE	NT IN RHODE ISLAND	-DO NOT ALTER- Chang	es regulre (lline e	f Form 642 - R.I.G.L. 7-1	
			Address	r Form 642 - R.J.G.L. 7-1	6-11
JUDI GRAHAM	<u></u>				
Iddress			City	Zip	
19-B LARK INDUSTR	IAL PARKWAY		GREENVILLE	l i	, 02828-
	<u></u>				

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



File Date	9-13-02
Check No.	1079
<i>B</i> <u>y:</u>	de
FOR SECRE	TARY 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.

Judi Graham	9-11-02
Signature of Authorized Person	Data

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

1	5	
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ID	Number DLLC 86373	Annual Report for the year 2001
1.	The name of the limited liability com	pany is:
	GRAHAM DEVELOPMENT COMPA	ANY, LLC
2.	The address of the principal office of 19-8 Lauk Industrial Control of the Industrial Control of	rial Parkway Arlenille QI 02828
3.	The state or other jurisdiction under	the laws of which it is formed is RHODE ISLAND
4.	The name and address of its resider	nt agent is: JUDI GRAHAM
	19-B LARK INDUSTRIAL PARKWA	Y GREENVILLE RI 02828-
5.6.	may be directed are: 19-8 h	mited liability company and the name or title of a person to whom communications when Industrial Parkway L 02828 Gud Araham of the business in which the limited liability company is actually engaged in this welcoment
7.	David Graham Judi Shaham	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. **Exact Name of Limited Liability Company**
File D Check By:		By Gudi Shaham Manager Title Form No. 632 Revised 01/99

DETACH BOTTOM BEFORE RETURNING



Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

•	EMITED LIABILITY COMPANY
1D Number 86373	Annual Report for the year 2000
1. The name of the limited liability compa	it Company LLC
	l Harkway Greenville QI 02828
The state or other jurisdiction under the	laws of which it is formed is: Rhode Island .
4. The name and address of its resident ag	gentis: Judi Draham
19-B Lark Industrial	Parkway Sheenville RI 02828
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:	9-B hark Industrial Parkway Greenible
RI 02828	Judi Graham
state. The estate were	
7. If the limited liability company has ma company Name	nagers, the name and address of each manager of the limited liability Address
Judi Shaham	5 Blueberry dane Johnston RJ 02919
FILED FEB 22 2001 By UD 259158	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. LLC Exact Name of Limited Liability Company By Huli Arabam Manager Title
Revised 8/97	S INO



Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335

L	IMITED LIABILITY COMPANY
1D Number 86373	Annual Report for the year 1999
1. The name of the limited liability compar <u>Staham Developmen</u>	
2. The address of the principal office of the	
	laws of which it is formed is: Rhode Island
 The name and address of its resident ad 	entis Judi Susham.
19-B Lack Industrial	Proker on one
5. The current mailing address of the	Theruste (XI 02828
RI 02828	imited liability company and the name or title of a person to whom 1-B hack Industrial Parkway Greenible Judi Graham
state: Real estate devel	business in which the limited liability company is actually engaged in this
 If the limited liability company has man company Name 	agers, the name and address of each manager of the limited liability
David Graham Judi Shaham	5 Blueberry dane Glaston RJ 02919 5 Blueberry dane Glaston RJ 02917
Dated February 20, 2001	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.
FILED	Draham Development Company 11 (
FEB 2 2 2001	Graham Development Company LLC Exact Name of Limited Liability Company
By_ 1(11) 259158	By Judi Straham Manager
Form No. LLC-19 Revised 8/97	Titlo



Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

L	IMITED LIABILITY COMPANY
1D Number 86373	Annual Report for the year 1998
1. The name of the limited liability compared by Staham Developmen	
	Warkway Greenville QI 02828
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 ag	ent is: Judi Diaham
19-B Lack Industrial	Parkway Sheenille RI 02828
The current mailing address of the I	imited liability company and the same as title if
communications may be directed are:	7-8 Lack Industrial Parkway Greenible
RI 02828	Judi Graham
6. A brief statement of the character of the	
state: Real estate devel	business in which the limited liability company is actually engaged in the
 If the limited liability company has mar company 	nagers, the name and address of each manager of the limited liability
Warid Graham Judi Shaham	5 Blueberry dane Johnston RJ 02919 5 Blueberry dane Johnston RJ 02919
<u> </u>	Continue Colonation (Rel 02919
Dated February 20, 2001 FILED	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.
FEB 2 2 2001	Graham Development Company LLC Exact Name of Limited Liability Company
By 1(12) 25918	By Judi Straham
Form No. LLC-19	
Revised 8/97	5



Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335

	Li	MITED LIABILITY COMPANY
ID	Number <u>86373</u>	Annual Report for the year 1997
1.	The name of the limited liability compan	A.
2.	The address of the principal office of the	· /) · · · · · · · · · · · · · · · · · ·
3.	The state or other jurisdiction under the I	aws of which it is formed is: Rhode Island
	The name and address of its resident ago	
_	19-B Lark Industrial	Park ()
5. 7		
C	communications may be directed are:	imited liability company and the name or title of a person to who I-B Rack Industrial Parkway Areenible
_	RI 02828	Judi Graham
6. A	brief statement of the character of the late: Real estate devel	business in which the limited liability company is actually engaged in this
7. If	the limited liability company has man ompany <i>Name</i>	agers, the name and address of each manager of the limited liability
7	Javid Graham Judi Shaham	5 Blueberry dane Johnston RJ 02919 5 Blueberry dane Johnston RJ 02917
	<u>J</u>	
Dated	FILED	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.
	FEB 22 2001	Graham Development Company LLC Exact Name of Limited Liability Company!
	By 13 1910 25 150	By Kidi Draham
	7,40 0 Ho 11 75 6 H 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	O Manager
Form No. Revised 8		Ŏ Titlo

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.# 86373

	Affinial Report for the year 1996
FIRST:	The name of the limited hability company is: GRAHAM DEVELOPMENT COMPANY, LLC
SECOND:	The address of the principal office of the limited liability company is
	850 Fleet Center, Providence, RI 02903
THIRD:	The state or other jurisdiction under the laws of which it is formed is. Rhode Island
FOURTH:	The name and address of its resident agent is: Robert A. Pitassi, Esq.
	850 Fleet Center, Providence, RI 02903
FIFTH:	The current maing address of the limited liability company and the name or title of a person to whom Robert A. Pitassi, Esq.
	850 Fleet Center, Providence, RI 02903
	A brief statement of the character of the business in which the corporation is actually engaged in this state: Engaging in the ownership, leasing, construction, operation, management and development of real propert
Dated_&Lp	tember 4 1996 GRAHAM DEVELOPMENT COMPANY, LLC
	Exact Name of Limited Liability Company
File Date: _ Check No: _	
 Ву:	To be signed, the manner required by the home state.
	tary of State Use Only Title General Manager
	