



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. 89775		2. Exact name of the limited liability company Northborough Capital Partners, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island ACQUIRING DEBT SECURITIES & VARIOUS SECURITY INTERESTS RELATED THERETO; AND ACQUIRING, DEVELOPING, OWNING, LEASING, MORTGAGING, OPERATING AND DISPOSING OF REAL			
5. Principal office address 56 Pine Street		City Providence	State RI	Zip 02903	
Contact Name Scott B. Adams		Contact Title Managing Director			
Street Address 56 Pine Street		City Providence	State RI	Zip 02903	
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Agent Name Scott B. Adams		Address 56 Pine Street			
Address		City Providence, RI	Zip 02903		

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



8 9 7 7 5

File Date	9/21/05
Check No.	184
By	A
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.

Scott B. Adams 9-20-05
Signature of Authorized Person Date

Scott B. Adams
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. 89775		2. Exact name of the limited liability company Northborough Capital Partners, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island ACQUIRING DEBT SECURITIES & VARIOUS SECURITY INTERESTS RELATED THERETO; AND ACQUIRING, DEVELOPING, OWNING, LEASING, MORTGAGING, OPERATING AND DISPOSING OF REAL	
5. Principal office address 56 PINE STREET		City PROVIDENCE	State RI
		Zip 02903	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name SCOTT B ADAMS		Contact Title Managing Director	
Street Address 56 PINE STREET		City PROVIDENCE	State RI
		Zip 02903	
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 Scott B. Adams		• Manager Name Kevin Gillis	
Street Address 56 Pine Street		• Street Address 56 Pine Street	
City Providence	State RI	Zip 02903	City Providence
			State RI
			Zip 02903
Manager Name James R. Simmons		• Manager Name Richard Nadeau, Jr.	
Street Address 56 Pine Street		• Street Address 56 Pine Street	
City Providence	State RI	Zip 02903	City Providence
			State RI
			Zip 02903
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name RICHARD NADEAU, JR.		Address 56 PINE STREET	
Address NADEAU & SIMMONS, P.C.		City PROVIDENCE	Zip 02903

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



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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.

Scott B Adams 9.29.04
Signature of Authorized Person Date

Scott B. Adams, Managing Director
Print or Type Name of Authorized Person

89775 DLLC 09/28/04 09:10:53 AM

File Date 11/10/04

Check No. 4441

By: W.

FOR SECRETARY OF STATE USE ONLY



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. 89775		2. Exact name of the limited liability company Northborough Capital Partners, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island ACQUIRING DEBT SECURITIES & VARIOUS SECURITY INTERESTS RELATED THERETO; AND ACQUIRING, DEVELOPING, OWNING, LEASING, MORTGAGING, OPERATING AND DISPOSING OF REAL	
5. Principal office address 56 PINE ST.		City PROVIDENCE	State RI
		Zip 02903-	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name SCOTT B ADAMS		Contact Title Managing Director	
Street Address 56 PINE STREET		City PROVIDENCE	State RI
		Zip 02903-	
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 Scott B. Adams		*Manager Name Kevin Gillis	
Street Address 56 Pine St.		*Street Address 56 Pine St.	
City Providence	State RO	Zip 02903	*City Providence
			*State RI
			*Zip 02903
Manager Name James R. Simmons		*Manager Name Richard Nadeau, Jr	
Street Address 56 Pine St		*Street Address 56 Pine St.	
City Providence	State RI	Zip 02903	*City Providence
			*State RI
			*Zip 02903
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name RICHARD NADEAU, JR.		Address 56 PINE STREET	
Address NADEAU & SIMMONS, P.C.		City PROVIDENCE	Zip 02903

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



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89775 DLLC 09/16/03 03:33:17 PM

File Date 9-22-03

Check No. 4123

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]
Signature of Authorized Person Date

Scott B. Adams, Managing Director
Print or Type Name of Authorized Person



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

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. *89775*		2. Exact name of the limited liability company Northborough Capital Partners, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island ACQUIRING DEBT SECURITIES & VARIOUS SECURITY INTERESTS RELATED THERETO; AND ACQUIRING, DEVELOPING, OWNING, LEASING, MORTGAGING, OPERATING AND DISPOSING OF REAL	
5. Principal office address 56 Pine Street		City PROVIDENCE	State RI
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Scott B Adams		Contact Title Managing Director	
Street Address 56 Pine Street		City PROVIDENCE	State RI
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 Scott B. Adams		Street Address	
Street Address 56 Pine Street		City Providence	State RI
City Providence		State RI	Zip 02903
Manager Name		Street Address	
Street Address		City	State
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 RICHARD NADEAU, JR.		Address 56 PINE STREET	
Address NADEAU & SIMMONS, P.C.		City PROVIDENCE	Zip 02903

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



* 8 9 7 7 5 *

89775 DLLC10/2/0210:58:24 AM

File Date 10-23-02

Check No. 3861

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] 11-4-02
Signature of Authorized Person Date

Scott B. Adams Managing Director
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

ID Number DLLC 89775

Annual Report for the year 2001

1. The name of the limited liability company is:

Northborough Capital Partners, LLC

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

56 Pine Street, Providence, RI 02903

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 agent is: RICHARD NADEAU, JR.

56 Pine Street, Providence, RI 02903

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: Scott B. Adams

56 Pine Street, Providence, RI 02903

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Acquiring debt securities and various security interests related thereto: and acquiring, developing, owning, leasing, mortgaging, operating and disposing of real property.

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

Scott B. Adams

45 Annawamscutt Rd., Barrington, RI 02806

Dated 10-1-01

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.



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Northborough Capital Partners, LLC

Exact Name of Limited Liability Company

By Scott B. Adams

Scott B. Adams, Operating Manager

Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>10-4-01</u>
Check No.:	<u>13198</u>
By:	<u>[Signature]</u>

Form No. 632
Revised 01/99

DETACH BOTTOM BEFORE RETURNING

Please detach and mail the above section including payment in the amount of \$50.00 made payable to Secretary of State. If the registered office and/or registered agent indicated below has changed, Form 642 must be filed in this office. Forms may be

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

ID Number DLLC 89775

Annual Report for the year 2000

1. The name of the limited liability company is:

Northborough Realty Holdings, LLC

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

c/o Miller Caine, Inc., 40 Westminster St., Providence, RI 02903

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 agent is: RICHARD NADEAU, JR.

1250 TURKS HEAD BUILDING PROVIDENCE RI 02903

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: Scott B. Adams, c/o Miller Caine, Inc., 40 Westminster St.,

Providence, R.I. 02903

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Acquiring debt securities and various security interests related thereto; and acquiring, developing, owning, leasing, mortgaging, operating and disposing of real property.

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

Name

Address

Scott B. Adams

45 Annawamscutt Rd., Barrington, RI 02806

Dated 10/3/00



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.

Northborough Realty Holdings, LLC
Exact Name of Limited Liability Company

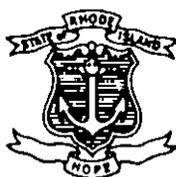
By Scott B Adams

Scott B. Adams, Operating Manager
Title

FOR SECRETARY OF STATE ONLY
FILED
File Date: OCT 03 2000
Check No.: CP 3523
By: [Signature]

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

ID Number LL 89775

Annual Report for the year 1999

- The name of the limited liability company is:
Northborough Realty Holdings, LLC
- The address of the principal office of the limited liability company is:
c/o Miller Caine, Inc., 40 Westminster Street, Providence, RI 02903
- The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND
- The name and address of its resident agent is: RICHARD NADEAU, JR.
1250 TURKS HEAD BUILDING PROVIDENCE, RI 02903
- The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Scott B. Adams, c/o Miller Caine, Inc., 40 Westminster St.,
Providence, RI 02903
- A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Acquiring debt securities and various security interests related thereto, and acquiring, developing, owning, leasing, mortgaging, operating and disposing of real property
- If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	Address
<u>Scott B. Adams</u>	<u>45 Annawamscutt Rd., Barrington, RI 02806</u>
_____	_____
_____	_____

Dated _____

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.



Northborough Realty Holdings, LLC
Exact Name of Limited Liability Company

By: Scott B. Adams
Operating Manager
Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>10-1-99</u>
Check No.:	<u>3316</u>
By:	<u>AMF</u>

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

ID Number LL 89775

Annual Report for the year 1998

1. The name of the limited liability company is:

Northborough Realty Holdings, LLC

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

c/o Miller Caine Inc., 40 Westminster Street, Providence, RI

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 agent is: RICHARD NADEAU, JR.

1250 TURKS HEAD BUILDING PROVIDENCE, RI 02903

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: Scott B. Adams, c/o Miller Caine Inc. 40 Westminster Street, Providence, RI

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: acquiring debt securities and various security interests related thereto, and acquiring, developing, owning, leasing, mortgaging, operating and disposing

of real property

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

Name

Address

Dated October 8, 1998

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.

Northborough Realty Holdings, LLC

Exact Name of Limited Liability Company

By Scott B Adams

Operating Partner
Title



* 8 9 7 7 5 *

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>PAID</u>
Check No.:	<u>OCT 13 1998</u>
By:	<u>LD 3181</u>

Form No. LLC-19
Revised 8/97

DETACH BOTTOM BEFORE RETURNING

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 0089775

Annual Report for the year 1997

- The name of the limited liability company is:
Northborough Realty Holdings, LLC
- The address of the principal office of the limited liability company is:
c/o Miller Caine Incorporated, 40 Westminster Street, Providence, RI
- The state or other jurisdiction under the laws of which it is formed is: Rhode Island
- The name and address of its resident agent is: Richard Nadeau, Jr., Esq., 1250 Turks Head Building, Providence, RI 02903
- The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Scott B. Adams, c/o Miller Caine Incorporated, 40 Westminster Street, Providence, RI 02903
- A brief statement of the character of the business in which the limited liability company is actually engaged in this state: acquiring debt securities and various security interests related thereto; and acquiring, developing, owning, leasing, mortgaging, operating and disposing of real property
- If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	Address
<u>Scott B. Adams</u>	<u>45 Ansonia St. Providence, RI 02906</u>

Dated 9-23, 1997

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.

PAID
3036 **OCT 1 1997**
SECRETARY OF STATE
CAA

Northborough Realty Holdings, LLC
Exact Name of Limited Liability Company

By Scott B. Adams
Operating Manager
Title