

Matthew A. Brown, Secretary of State Corporations Division North Main Street, Providence, RI 02903-1335

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

		limited liabilty company			<u> </u>
101777 3. State of Formation		The Alliance for Art and Architecture LLC 4 Brief description of the character of the business which is actually conducted in Rhode Island			
S. State of Pormation RHODE ISLANI		uption of the character of the ARCHITECTURE	ne pusiness which is actually condu	icted in Khod e Island	
5. Principal office ad VERNON COURT	raress C, BELLEVUE AVE		City NEWPORT	State RI	<i>Zip</i> 02840
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Contact Name		The same of the same of the same	Contact Title	LE-OF CONTACT	ERSON
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Street Address JERNON COURT	BELLEVUE AVE.		City NEWPORT	State RI	<i>Zip</i> 02840-
		MANAGED OF THE	LIMITED LIABILITY CO		
	FILL IN	SPACES BEFORE USIN	G ATTACHMENTS A ("X", BC	OX FOR ATTACHMENT	
	ANY MODIFICATION	IS TO MANAGERS REQ	UIRES FILING OF AMENDMEN	T.: R.I.G.L 7-16-12 (a) (2) / :7-16-52
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City	State	Zip	*Cin	State	Zip
Manager Nam	J . <i>:</i>		. .		
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Lity	State	Zip	.City	State	မြို့ <mark>ယ</mark> ႏို
B. RESIDENT AG	ENT IN RHODE ISLA	ND DO NOT ALTER C	hanges require filling o	f Form 642 RI.GI	27-16-11-15-78-35-65-65-65-65-65-65-65-65-65-65-65-65-65
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gent Name			Address		
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gent Name BRIAN G. BARI Iddress	DORF, ESQ.	an authorized persoi	36 WASHINGTO City NEWPORT n pursuant to 7-16-66.		02840 05 1:07 23 PH
gent Name BRIAN G. BARI Iddress This report must	DORF, ESQ.		NEWPORT The pursuant to 7-16-66. Under penalty of this report, included the pursuant included the pursuant included the penalty of the pursuant included	of perjury, I declare and	affirm that I have examined g schedules and examined.
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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

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I. ID No.	2. Exac	name of the limited l			 	<u> </u>
101777	The A	Illiance for Art an				
3. State of Formation RHODE ISLAND		ART AND ARCH		business which is actually condi	icted in Rhode Island	
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5. Principal office oddre VERNON COURT,		EVUE AVENUE		City NEWPORT	State R I	Zip 02840
6. MAILING ADDE			BILITY COMPA	NY AND NAME OR TIT		
LAURENCE CUTI	LER					
Street Address /ERNON_COURT,				City . NEWPORT	State RI	<i>Zip</i> 02840-
7. NAME AND ADI		FILL IN SPACE	S BEFORE USING		OX FOR ATTACHMENT,) 🗆
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ionager ivame				•Manager Name •		
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Manuger Name	• • • •	J	.1	Manager Name		
Sireet Address			<u> </u>	Street Address		
Lity		State	Zıp	City	State	Zip
B. RESIDENT AGEN gent Name BRIAN G. BARDO			NOT ALTER- CH	sanges require filing o	.	J
Iddress				City	AVENUE	Zip
BARDORF & BARD	ORF			NEWPORT		02840
his report must be	signed	in in k by an aut	horized person j	oursuant to 7-16-66.		
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101777 DLLC 09.	- 1	11:03:28 AM		this report, inclu		affirm that I have examined g schedules and statements, a are true and correct.
Check No. 1951	6_			Signature of Author		Dute
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FOR SECRETARY OF S	TATE U	SE ONLY		Print or Type Nan	ne of Authorized Person	



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) I. ID No. 2. Exact name of the limited liabilty company 101777 The Alliance for Art and Architecture LLC 4. Brief description of the character of the business which is actually conducted in Rhode Island 3. State of Formation ART AND ARCHITECTURE RHODE ISLAND 5. Principal office address State City Zip VERNON COURT, BELLEVUE AVENUE NEWPORT RI 02840 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title LAURENCE CUTLER Street Address City State VERNON COURT BELLEVUE AVE. . NEWPORT RI 02840-7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS - ("ス" 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 · Manager Name Street Address * Street Address City State Zip ·City State Zip Manager Name Manager Name Street Address Street Address City City Zip State 8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filling of Form 642 - R.I.G.L. 7-16-11 Agent Name Address BRIAN G. BARDORF, ESQ. 130 BELLEVUE AVENUE Address City Zip BARDORF & BARDORF NEWPORT 02840

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



File Date 10/2/03
Check No. 1728
B _W Ou
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 Authorized Person Date

Laurence Cutler, Member

Print 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 2002

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

(FORM MUST BE T	YPED OR PRINT	ED IN BLACK)	_				
1. ID No. *101777*		e of the limited I	iability company d Architecture LLC		- - 1		
3. State of Formution RHODE ISLAN	AR	rief description of AND ARCH		business which is actually conducted in Rhode Island			
5. Principal office at VERNON COUR		E AVENUE	-	Ciņ [,] NEWPORT	State R I		<i>Zip</i> 02840
Contact Name	DRESS OF L	IMITED LIA	BILITY COMPANY	AND NAME OR TIT	LE OF CONTACT	PERSON:	
Street Address VERNON COURT	. BELLEVU	E AVE.	-	City NEWPORT	State RI		Zip 02840-
7. NAME AND A		TILL IN SPACE	S BEFORE USING AT	TACHMENTS ("X" BO S FILING OF AMENDMEN *Munager Name	OX FOR ATTACHMEN	חים	
Street Address	<u>.</u>			* Street Address			
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Manager Name				*Manager Name			
Street Address				·Street Address			
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Agent Name	ENT IN RHOL	E ISLAND -0	O NOT ALTER- Chan	ges require filing o		kL. 7-16-11	
BRIAN G. BAR		Address				Zip	
				City -		Zip	

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



101777	DLLC9/23/0212:12:02 PM
File Date_	11-1-02
Check No	1420
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FOR SECR	ETARY 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.

Laurence Cutler, Member

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 101777	Annual Report for the year 2001
1.	The name of the limited liability comp	pany is:
	The Alliance for Art and Architecture	LLC
2.	The address of the principal office of	the limited liability company is:
	Vernon Court, Bellevue	Avenue, Newport, RI 02840
3.	The state or other jurisdiction under t	he laws of which it is formed is RHODE ISLAND
4.	The name and address of its residen	t agent is: BRIAN G. BARDORF, ESQ.
	BARDORF & BARDORF 130 BELLE	VUE AVENUE NEWPORT RI 02840
5.		nited liability company and the name or title of a person to whom communications Cutler, Vernon Court, Bellevue Avenue, Newport, RI
6.	state: Art & Archite	
7.	If the limited liability company has ma Name	anagers, the name and address of each manager of the limited liability company Address
Dai	ted	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. The Alliance for Art and Architecture, LLC Exact Name of Limited Liability Company
File	FOR SECRETARY OF STATE USE ONLY Date: 0 - 15 - 0 /	Laurence Cutler, Member
Jhed 3y:	ck No.: 2496	Title Form No. 632 Revised 01/99



lle Date:

heck No.:

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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

Number DLLC 1017/7	Annual Report for the year 2000
. The name of the limited liability company l	s:
The Alliance for Art and Architecture LLC	
The address of the principal office of the life	mited liability company is:
Vernon Court, Bellevue A	venue. Newport. RI 02840
÷	ws of which it is formed is RHODE ISLAND
The name and address of its resident age	
BARDORF & BARDORF 130 BELLEVUE	
The current mailing address of the limited	liability company and the name or title of a person to whom communications
may be directed are: <u>Laurence Cur</u>	tler, Vernon Court, Bellevue Avenue, Newport, RI 02840
A brief statement of the character of the	business in which the limited liability company is actually engaged in this
state: Art and architectur	
If the limited liability company has manage	rs, the name and address of each manager of the limited liability company Address
CAMENCES CUTTER	Vernon Court 492 Bellevis tre, Neight
	· · · · · · · · · · · · · · · · · · ·
	
a ted	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.
	Aigr on proseivents committed tistatil als and alle collect
	The Alliance: for Art and Architecture LLC
	Exact Name of Limited Liability Company
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Cutler Manager

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Form No. 632

Revised 01/99

Filing Fee: \$50.00

To be filed annually between September 1 and November 1

Revised 01/99



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 <u>LL 101777</u>	Annual Report for the year 1999	
1.	The name of the limited liability comp	pany is:	
	The Alliance for Art and Architecture	<u>cro</u>	
2.	The address of the principal office of	the limited liability company is:	
	Vernon Court, Bellevue Av	enue, Newport, RI 02840	•
3.	The state or other jurisdiction under t	the laws of which it is formed is RHODE ISLAND	
4.		it agent is: BRIAN G. BARDORF, ESQ.	
		VUE AVENUE NEWPORT, RI 02840	
5 .		mited liability company and the name or title of a person to wi	nom communications
		Cutler, Vernon Court, Bellevue Ave. Newport	
6.	A brief statement of the character of Art and Architec state:	of the business in which the limited liability company is acture	Jally engaged in this
7.	If the limited liability company has ma Name	anagers, the name and address of each manager of the limit Address	ed liability company
Dat	ed	Under penalty of perjury, I declare and affirm that I report, including any accompanying schedules a that all statements contained herein are true and corr	nd statements, and
		The Alliance for Art and Architect	
j	FOR SECRETARY OF STATE USE ONLY	Exact Name of Limited Liability Company By Welmer.	
	Date: 10-12-99	Lawrence Cutler, Member	
hec	k No.: 450	Title	
y:	6tmF		Form No. 632 Revised 01/99