



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 02903-1535
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. RI No. 99482		2. Exact name of the limited liability company MULAS, L.L.C.	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE HOLDING COMPANY	
5. Principal office address 19 Oak Street		City Wakefield	State RI
		Zip 02879	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Donald J. Lally, Jr.		Contact Title Partner	
Street Address 19 Oak Street		City Wakefield	State RI
		Zip 02879	
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		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name DONALD J. LALLY, JR.		Address	
Address 19 OAK STREET		City WAKEFIELD	Zip 02879

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



File Date	12/1/05	*99482*
Check No.	1032	
By:		
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
Donald J. Lally, Jr.
Print or Type Name of Authorized Person
10/25/05
Date



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 02933-1335
401-222-3960

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. 99482		2. Exact name of the limited liability company MULAS, L.L.C.	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE HOLDING COMPANY	
5. Principal office address 19 Oak Street		City Wakefield	State RI
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Donald J. Lally, Jr.		Contact Title Partner	Zip RI
Street Address 19 Oak Street		City Wakefield	State RI
			Zip 02879
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			
1.		Manager Name	
Street Address		Street Address	
City Wakefield	Zip 02879	City	State
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name DONALD J. LALLY, JR.		Address	
Address 19 OAK STREET		City WAKEFIELD	Zip 02879

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



* 9 9 4 8 2 *

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	12/9/04
Check No	321
By	DL
FOR SECRETARY OF STATE USE ONLY	

Signature of Authorized Person **Donald J. Lally, Jr.** Date **11-3-04**
Print or Type Name of Authorized Person **Donald J. Lally, Jr.**



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
170 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. 99482		2. Exact name of the limited liability company MULAS, L.L.C.			
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE HOLDING COMPANY			
5. Principal office address 19 Oak Street		City Wakefield	State RI	Zip 02879	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Donald J. Lally, Jr.		Contact Title Partner			
Street Address 19 Oak Street		City Wakefield,	State RI	Zip 02879	
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 Kevin E. Mulholland		Manager Name Donald J. Lally, Jr.			
Street Address 50 Birchwood Drive		Street Address 19 Oak Street			
City Narragansett	State RI	Zip 02882	City Wakefield	State RI	Zip 02879
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 DONALD J. LALLY, JR.			Address		
Address 19 OAK STREET			City WAKEFIELD	Zip 02879	

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



File Date	<u>9-12-03</u>
Check No.	<u>282</u>
By	<u>[Signature]</u>
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] 9-9-03
Signature of Authorized Person Date
Donald J. Lally, Jr.
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 2002

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No *99482*		2. Exact name of the limited liability company MULAS, L.L.C.	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE HOLDING COMPANY	
5. Principal office address 19 OAK STREET		City WAKEFIELD	State RI Zip 02879
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name DONALD J LALLY, JR.		Contact Title Partner	
Street Address 19 OAK STREET		City WAKEFIELD	State RI Zip 02879
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 Donald J. Lally, Jr.		Manager Name Donald J. Lally, Jr.	
Street Address 50 Elmwood Drive		Street Address 19 Oak Street	
City Wakefield	State RI	Zip 02879	City Wakefield
Manager Name Donald J. Lally, Jr.		Manager Name Donald J. Lally, Jr.	
Street Address 50 Elmwood Drive		Street Address 19 Oak Street	
City Wakefield	State RI	Zip 02879	City Wakefield
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name DONALD J. LALLY, JR.		Address 19 OAK STREET	
Address 19 OAK STREET		City WAKEFIELD	Zip 02879

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



99482 DLLC7/25/0311:06:52 AM
File Date <u>8-6-03</u>
Check No. <u>280</u>
By: <u>[Signature]</u>
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] 7/24/03
Signature of Authorized Person Date
DONALD J. LALLY, JR.
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 99482

Annual Report for the year 2001

1. The name of the limited liability company is:

MULAS, L.L.C.

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

19 Oak Street, Wakefield, RI 02879

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: DONALD J. LALLY, JR.

19 OAK STREET WAKEFIELD RI 02879

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: Donald J. Lally, Jr., 19 Oak Street, Wakefield, RI 02879

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

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

Name	Address
_____	_____
_____	_____
_____	_____

Dated November 6, 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.

MULAS, L.L.C.

Exact Name of Limited Liability Company

By Donald J. Lally Jr.
Partner

Title

Form No. 632
Revised 01/99

FOR SECRETARY OF STATE USE ONLY

File Date: 11-5-01

Check No.: 10117

By: 2.

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 99482

Annual Report for the year 2000

1. The name of the limited liability company is:

MULAS, L.L.C.

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

19 Oak Street, Wakefield, RI 02879

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: DONALD J. LALLY, JR.

19 OAK STREET WAKEFIELD RI 02879

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: Donald J. Lally, Jr., 19 Oak Street, Wakefield, RI 02879

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

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

<i>Name</i>	<i>Address</i>
_____	_____
_____	_____
_____	_____

Dated September 12, 2000



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.

MULAS, L.L.C.

Exact Name of Limited Liability Company

By

Donald J. Lally, Jr.
Partner

Title

FOR SECRETARY OF STATE USE ONLY

File Date:

9/12/00

Check No.:

174

By:

cu

Form No. 632
Revised 01/99

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 99482

Annual Report for the year 1999

1. The name of the limited liability company is:
MULAS, L.L.C.
2. The address of the principal office of the limited liability company is:
19 Oak Street, Wakefield, RI 02879
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: DONALD J. LALLY, JR.
19 OAK STREET WAKEFIELD, RI 02879
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: Donald J. Lally, Jr., 19 Oak Street, Wakefield, RI 02879
6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: To hold Real Estate

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

<u>N/A</u>	

Dated 9/20/99



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.

MULAS, L.L.C

Exact Name of Limited Liability Company

By

K E Mullan

President

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 9-22-99

Check No.: 128

By: AMF

Form No. 632
Revised 01/99