



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. 99485		2. Exact name of the limited liability company HARVAN MANAGEMENT, 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 ACQUIRING, DEVELOPING, LEASING AND SELLING REAL ESTATE OR TO ENGAGE IN ANY OTHER BUSINESS THAT THE MEMBERS DEEM DESIRABLE	
5. Principal office address 40 IVY GARDEN WAY		City EAST GREENWICH	State RI
		Zip 02818-	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name STEPHEN J DIGIANFILIPPO		Contact Title	
Street Address 50 PARK ROW WEST SUITE 100		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 John Vanikiotis		Manager Name	
Street Address 40 Ivy Garden Way		Street Address	
City East Greenwich	State RI	City	State
Zip 02818		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 STEPHEN J. DIGIANFILIPPO, ESQ.		Address 50 PARK ROW WEST, SUITE 111	
Address VIEIRA & DIGIANFILIPPO LTD.		City PROVIDENCE	Zip 02903

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



9 9 4 8 5

\*99485 DLLC 09/22/05 02:08:09 PM\*

File Date 10/22/05

Check No. 295

By: JMD

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.

John Vanikiotis 10-17-05  
Signature of Authorized Person Date  
John Vanikiotis, Manager  
Print or Type Name of Authorized Person



STATE OF RHODE ISLAND  
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Matthew A. Brown, Secretary of State  
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100 North Main Street, Providence, RI 02903-1335  
401 222 3940

**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. 99485		2. Exact name of the limited liability company HARVAN MANAGEMENT, 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 ACQUIRING, DEVELOPING, LEASING AND SELLING REAL ESTATE OR TO ENGAGE IN ANY OTHER BUSINESS THAT THE MEMBERS DEEM DESIRABLE		
5. Principal office address 40 Ivy Garden Way		City EAST GREENWICH	State RI	Zip 02818-
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name STEPHEN J. DIGIANFILIPPO Contact Title Attorney				
Street Address 50 PARK ROW WEST SUITE 111		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 John Vanikiotis		Manager Name		
Street Address 40 Ivy Garden Way		Street Address		
City East Greenwich	State RI	Zip 02818	City	State
Manager Name		Manager Name		
Street Address		Street Address		
City	State	Zip	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 STEPHEN J. DIGIANFILIPPO, ESQ.		Address 50 PARK ROW WEST, SUITE 111		
Address VETRA & DIGIANFILIPPO LTD.		City PROVIDENCE	Zip 02903	

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



9 9 4 8 5

File Date	10/21/04
Check No	250
By	ls
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: John Vanikiotis  
Date: 10-12-04  
Print or Type Name of Authorized Person: John Vanikiotis, Manager



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. 99485		2. Exact name of the limited liability company HARVAN MANAGEMENT, 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 ACQUIRING, DEVELOPING, LEASING AND SELLING REAL ESTATE OR TO ENGAGE IN ANY OTHER BUSINESS THAT THE MEMBERS DEEM DESIRABLE			
5. Principal office address 35 LYNN CIRCLE		City EAST GREENWICH	State RI	Zip 02818-	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON					
Contact Name STEPHEN J DIGIANFILIPPO		Contact Title			
Street Address 50 PARK ROW WEST SUITE 111		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 John Vanikiotis, Trustee		Manager Name			
Street Address 35 LYNN CIRCLE 40 IVY GARDEN WAY		Street Address			
City East Greenwich	State RI	Zip 02818	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 STEPHEN J. DIGIANFILIPPO, ESQ.		Address 50 PARK ROW WEST, SUITE 111			
Address VIEIRA & DIGIANFILIPPO LTD.		City PROVIDENCE		Zip 02903	

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



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File Date

FILED

Check No.

OCT 08 2003

By

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

10-8-03

Date

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. 99485		2. Exact name of the limited liability company HARVAN MANAGEMENT, 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 ACQUIRING, DEVELOPING, LEASING AND SELLING REAL ESTATE OR TO ENGAGE IN ANY OTHER BUSINESS THAT THE MEMBERS DEEM DESIRABLE	
5. Principal office address 35 Lynn Circle		City East Greenwich	State Rhode Island
		Zip 02818	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Stephen J. DiGianfilippo, Esq.		Contact Title Registered Agent	
Street Address 50 Park Row West, Suite 100		City Providence	State Rhode Island
		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 John Vanikiotis, Trustee		Manager Name	
Street Address 35 Lynn Circle		Street Address	
City East Greenwich	State Rhode Island	City	State
Zip 02818		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 STEPHEN J. DIGIANFILIPPO, ESQ.		Address VIEIRA & DIGIANFILIPPO, P.C.	
Address 50 PARK ROW WEST, SUITE 100		City PROVIDENCE	Zip 02903

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



\* 9 9 4 8 5 \*

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 11-6-02

Check No. 156

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

[Signature] 11-7-02  
Signature of Authorized Person Date

JOHN VANIKIOTIS  
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 99485

Annual Report for the year 2001

1. The name of the limited liability company is:

HARVAN MANAGEMENT, L.L.C.

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

35 Lynn Circle, East Greenwich, Rhode Island 02818

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: STEPHEN J. DIGIANFILIPPO, ESQ.

VIEIRA & DIGIANFILIPPO, P.C. 50 PARK ROW WEST, SUITE 100 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: Stephen J. DiGianfilippo, Esq., Vieira & DiGianfilippo Ltd.

50 Park Row West, Suite 100, Providence, Rhode Island 02903

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this acquiring, developing, leasing and selling real estate or to engage in any state: other business that the members deem desirable.

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

Name	Address
------	---------

John Vanikiotis, Trustee

35 Lynn Circle, East Greenwich, Rhode Island 02818

Dated 10-27, 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.

HARVAN MANAGEMENT, L.L.C.

*Exact Name of Limited Liability Company*

By John Vanikiotis 10-27-01  
John Vanikiotis, Trustee  
Manager  
Title

FOR SECRETARY OF STATE USE ONLY

File Date: 11-2-01

Check No.: 111

By: [Signature]

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 632 must be filed in this office. Form 632

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 99485

Annual Report for the year 2000

1. The name of the limited liability company is:

HARVAN MANAGEMENT, L.L.C.

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

1149 Division Street, East Greenwich, Rhode Island 02818

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: STEPHEN J. DIGIANFILIPPO

VIEIRA & DIGIANFILIPPO, P.C. 50 PARK ROW WEST, SUITE 100 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: Stephen J. DiGianfilippo, Esq., Vieira & DiGianfilippo

50 Park Row West, Suite 100, Providence, Rhode Island 02903

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: acquiring, developing, leasing and selling real estate or to engage in any other business that the members deem desirable,

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>
-------------	----------------

John Vanikiotis, Trustee

c/o 1149 Division Street, East Greenwich, Rhode Island 02818

Haralambos DaFoulas

465 Stoneridge Drive, East Greenwich, Rhode Island 02818

Dated October, 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.

HARVAN MANAGEMENT, L.L.C.

*Exact Name of Limited Liability Company*

By John Vanikiotis  
John Vanikiotis, Trustee  
Manager

*Title*

FOR SECRETARY OF STATE USE ONLY

File Date: 11/3

Check No.: 1053

By: de

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 99485

Annual Report for the year 1999

1. The name of the limited liability company is:  
HARVAN MANAGEMENT, L.L.C.
2. The address of the principal office of the limited liability company is:  
1149 Division Street, East Greenwich, RI 02818
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: STEPHEN J. DIGIANFILIPPO  
REALE & KALANDER, LTD. 146 WESTMINSTER 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: Stephen J. DiGianfilippo, 146 Westminster 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, developing, leasing and selling real estate or to engage in any other business that the members deem desirable.
7. If the limited liability company has managers, the name and address of each manager of the limited liability company  

Name	Address
<u>John Vanikiotis, Trustee</u>	<u>c/o 1149 Division Street, East Greenwich, RI 02818</u>
<u>Haralambos DaFoulas</u>	<u>465 Stoneridge Drive, East Greenwich, RI</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.

HARVAN MANAGEMENT, L.L.C.

Exact Name of Limited Liability Company

By John Vanikiotis  
Trustee  
Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>10/28/99</u>
Check No.:	<u>1033</u>
By:	<u>GDA</u>