





Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1333  
401.222.3044

**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 129985		2. Exact name of the limited liability company Green Light Properties, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE DEVELOPMENT / PROPERTY MANAGEMENT	
5. Principal office address 6 PALOU DRIVE		City N. PROVIDENCE	State RI
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name AZARIG KOOLOIAN JR. Contact Title PRESIDENT		City N. 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		City N. PROVIDENCE	State RI
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11		City NORTH PROVIDENCE	State RI

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



\* 1 2 9 9 8 5 \*

Date: 10/15/04  
 Check No.: 104  
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 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.

*Azarig Kooloian Jr.* 10/14/04  
 Signature of Authorized Person Date  
 AZARIG KOOLOIAN JR.  
 Print or Type Name of Authorized Person