



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. 93286		2. Exact name of the limited liability company TDS Realty, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island OWN, DEVELOP, AND MANAGE REAL ESTATE	
5. Principal office address C/O NEW ENGLAND BOATWORKS, ONE LAGOON ROAD		City PORTSMOUTH	State RI
		Zip 02871	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name THOMAS C RICH		Contact Title MEMBER	
Street Address ONE LAGOON ROAD		City PORTSMOUTH	State RI
		Zip 02871-	
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
State		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 STEVEN M. MCINNIS, ESQ.		Address 38 BELLEVUE AVENUE	
Address		City NEWPORT	Zip 02840

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



9 3 2 8 6

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.

1204 10/26/05  
Signature of Authorized Person Date

THOMAS C. RICH

Print or Type Name of Authorized Person

\*93286 DLLC 09/02/05 12:51:27 PM\*

File Date 11-01-05

Check No. 10426

By: 100

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  
401.222.3940

# 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. <b>93286</b>		2. Exact name of the limited liability company <b>TDS Realty, LLC</b>	
3. State of Formation <b>RHODE ISLAND</b>		4. Brief description of the character of the business which is actually conducted in Rhode Island <b>OWN, DEVELOP, AND MANAGE REAL ESTATE</b>	
5. Principal office address <b>One Lagoon Road/ New England Boatworks</b>		City <b>Portsmouth</b>	State <b>RI</b>
		Zip <b>02871</b>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name <b>Thomas C. Rich</b>		Contact Title <b>Member</b>	
Street Address <b>One Lagoon Road</b>		City <b>Portsmouth</b>	State <b>RI</b>
		Zip <b>02871</b>	
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 <b>STEVEN M. MCINNIS</b>		Address	
Address <b>38 BELLEVUE AVENUE</b>		City <b>NEWPORT</b>	Zip <b>02840</b>

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



\* 9 3 2 8 6 \*

File Date	<b>12/6/04</b>
Check No.	<b>12065</b>
By	<b>W.</b>
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.

**12 C 4** **11/3/07**  
Signature of Authorized Person Date  
**THOMAS C. RICH**  
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 2003**

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. *93286*		2. Exact name of the limited liability company TDS Realty, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island OWN, DEVELOP, AND MANAGE REAL ESTATE	
5. Principal office address ONE LAGOON ROAD/NE BOATWORKS		City PORTSMOUTH	State RI Zip 02871
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name THOMAS C RICH		Contact Title President	
Street Address ONE LAGOON RD.		City PORTSMOUTH	State RI Zip 02871-
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 STEVEN M. MCINNIS		Address 38 BELLEVUE AVENUE	
Address		City NEWPORT	Zip 02840

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



\* 9 3 2 8 6 \*

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.

Thomas C. Rich Sept 2, 2003  
Signature of Authorized Person Date

Thomas C. Rich

Print or Type Name of Authorized Person

\*93286 DLLC7/31/035:02:37 PM\*

File Date 9-11-03

Check No. 11482

By: TC

FOR SECRETARY OF STATE USE ONLY



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Innian, 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. *93286*		2. Exact name of the limited liability company TDS Realty, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island OWN, DEVELOP, AND MANAGE REAL ESTATE	
5. Principal office address ONE LAGOON ROAD/NE BOATWORKS		City PORTSMOUTH	State RI
		Zip 02871	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name THOMAS C RICH		Contact Title Member	
Street Address ONE LAGOON RD.		City PORTSMOUTH	State RI
		Zip 02871-	
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
State	Zip	City	State
Manager Name	Manager Name		
Street Address	Street Address		
City	State	Zip	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 STEVEN M. MCINNIS		Address 38 BELLEVUE AVENUE	
Address		City NEWPORT	Zip 02840

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



• 9 3 2 8 6 •

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.

*RCY* 3/SEPT/02  
Signature of Authorized Person Date

Thomas C. Rich

Print or Type Name of Authorized Person

93286 DLLC8/2002 12:41 PM  
FILED  
File Date  
OCT 07 2002  
Clock No.  
By: *CE10847*  
FOR SECRETARY OF STATE USE ONLY

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 93286

Annual Report for the year 2001

1. The name of the limited liability company is:

TDS Realty, LLC

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

c/o New England Boatworks, One Lagoon Road, Portsmouth, RI 02871

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: STEVEN M. MCINNIS

38 BELLEVUE AVENUE NEWPORT RI 02840

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: Thomas C. Rich

c/o New England Boatworks, Inc. One Lagoon Road, Portsmouth, RI 02871

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Own, develop and manage real estate.

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

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

N/A

Dated September 7, 2001



9 3 2 8 6

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.

TDS REALTY, LLC

Exact Name of Limited Liability Company

By

Thomas C. Rich, President  
Title

Form No. 632  
Revised 01/99

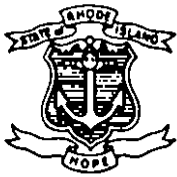
FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>9-26-01</u>
Check No.:	<u>10329</u>
By:	<u>[Signature]</u>

**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 93286

Annual Report for the year 2000

1. The name of the limited liability company is:

TDS Realty, LLC

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

c/o New England Boatworks, Inc. One Lagoon Road, Portsmouth, RI 02871

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: STEVEN M. MCINNIS

38 BELLEVUE AVENUE NEWPORT RI 02840

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: Thomas C. Rich

c/o New England Boatworks, Inc., One Lagoon Road, Portsmouth, RI 02871

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Own, develop and manage real estate

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

*Name*

*Address*

N/A

Dated Sept 13 2000



9 3 2 8 6

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.

TDS REALTY, LLC

*Exact Name of Limited Liability Company*

By Thomas C. Rich

Thomas C. Rich, President

*Title*

FOR SECRETARY OF STATE USE ONLY

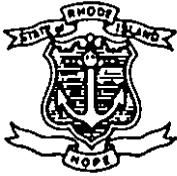
File Date: 10/3

Check No.: 9032

By: 20

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 93286

Annual Report for the year 1999

1. The name of the limited liability company is:  
TDS Realty, LLC
2. The address of the principal office of the limited liability company is:  
c/o New England Boatworks, Inc. One Lagoon Road, Portsmouth, RI 02871
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: STEVEN M. MCINNIS  
38 BELLEVUE AVENUE NEWPORT, RI 02840
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: Thomas C. Rich, c/o New England Boatworks, Inc., One Lagoon Road,  
Portsmouth, RI 02871
6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Ownership and management of real estate
7. If the limited liability company has managers, the name and address of each manager of the limited liability company  
Name Address  
N/A

Dated 12-8-99



\* 9 3 2 8 6 \*

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.

TDS REALTY, LLC

Exact Name of Limited Liability Company

By TC Rich

Thomas C. Rich, President

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 10-12-99

Check No.: 1130

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 93286

Annual Report for the year 1998

1. The name of the limited liability company is:  
TDS Realty, LLC
2. The address of the principal office of the limited liability company is:  
c/o New England Boatworks, Inc. One Lagoon Road, Portsmouth, RI 02871
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: STEVEN M. MCINNIS  
38 BELLEVUE AVENUE NEWPORT, RI 02840
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: Thomas C. Rich, c/o New England Boatworks, Inc.  
One Lagoon Road, Portsmouth, RI 02871
6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Ownership and management of real estate
7. If the limited liability company has managers, the name and address of each manager of the limited liability company  

Name	Address
N/A	

Dated SEPT 15, 19 98



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.

TDS Realty, LLC

Exact Name of Limited Liability Company

By

Thomas C. Rich Pres.

Thomas C. Rich, President

Title

FOR SECRETARY OF STATE USE ONLY

File Date: 9-30-98

Check No.: 1065

By:

ilp

Form No. LLC-19  
Revised 8/97

DETACH BOTTOM BEFORE RETURNING