

1. ID No.

Check No.

FOR SECRETARY OF STATE USE ONLY

130696

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

Corporations Division 100 North Main Street Providence, RI 02903-1335 401-222.3040

Matthew A. Brown, Secretary of State

GRANITE CITY LAW, LLC

2. Exact name of the limited liability company

(FORM MUST BE TYPED OR PRINTED IN BIACK)

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

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

3. State of Formation	4. Brief discription of the character of the business which is actually conducted in Rhode Island						
RHODE ISLAND	LEGAL SERVICES						
5. Principal office address		_	City	 _			
42 Granite Street			City Wood or la	State		Ζφ	
		Westerly	RI		02891		
6. MAILING ADDRESS OF I	TWILED TIVEITILA	COMPANY AND NAM	•	T PERSON:			
Michael L. Coz	golina		Contact Title				
Street Address	.2011110	<u> </u>					
			City	State		Z.ip	
42 Granite Street			Westerly	RI		02891	
7. NAME AND ADDRESS OF	F EACH MANAGER (OF THE LIMITED LIA	BILITY COMPANY, IF AP	PLICABLE		' 	
	FILL IN SPACES	BEFORE USING ATTA	CHMENTS ("X" BOX F	OR ATTACHMENT	カロ		
	FICATIONS TO MAI	NAGERS REQUIRES F	ILING OF AMENDMENT,	R.I.G.L. 7-16-12 (a) (2) / 7-16	-52 .′	
Manager Name		Manuger Name					
	•						
Sirvet Address	<u> </u>	Street Address					
•							
City	State	<i>7.u</i> p					
	· .		City	State		Zip	
Manager Name	I	.1				ļ	
			Manager Name				
Street Address							
			Street Address				
City	State		-				
	Siale	Zip	City	State		Zip	
8. RESIDENT AGENT IN DU	ODE ISLAND DO L	NOT ALTER OF	·	, <u> </u>			
8. RESIDENT AGENT IN RH Agent Name	ONE ISTMAN : DO L	NOT ALTER - Change:		642 <u>R.I.G.L.</u> 7-1	16-11		
•			Address				
MICHAEL L. COZZOLINO, ESQ.	<u> </u>						
Address			City		Zip		
42 GRANITE STREET			WESTERLY		l '		
			THE OTENET		02891-		
	This report must be	signed in ink by an a	uthorized person pursuant	to R.I.G.L. 7-16-6	56.		
			•				
1 ********							

Under penalty of perjury, I deviate and affirm that I have examined this report, including any accompanying scriedules and statements, and that all statements,

Print or Type Name 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 2004

Filing Period: September 1 - November 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. ID No. 2 Exact name of the limited liabilty company 130696 GRANITE CITY LAW, LLC 3. State of Formation 4 Brief description of the character of the business which is actually conducted in Rhode Island Legal services RHODE ISLAND 5 Principal office address State 42 GRANITE STREET WESTERLY RI 02891-6.MAILING ADDRESS. OF EIMITED LEABELITY COMPANY AND NAME OR PHILE OF CONTACT PERSON. Contact Name Contact Title George J. Bauerle, III Member Street Address City State Zip 22 West Main St. .North Kingstown RΙ 02852 7. NAME AND ADDRESSIONEACH MANAGER OF THE LIMITED LIABILITY COMPANY, THE APPLICABLE FILL INSPACES BEFORE USING ATTACHMENTS: ("X" BUX FOR ATTACHMENT) [] ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. REG. 17-16-12 (a) (2) / 7-16-52 Manager Name · Manager Name Street Address Street Address City State Zip *City State Zin Manager Name Manager Name Street Address Street Address City State Zip State SHRESIDENTAGE TANKENDE ISLANDEDO NOT ABTER Changes require tilling for the 42 Principality GEORGE J. BAUERLE, III ESQ. 22 WEST MAIN STREET Address Zıp NORTH KINGSTOWN 02852-

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



130696 DLI	C 09/2 <u>8/04</u> 03: <u>54:28</u> PM
File Date	FILED
Check No.	NOV 0.3 2004
В <u>у:</u>	Buh 49081
FOR SECRETAR	Y 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.

George J. Bauerle, III

Print or Type Name of Authorized Person