

State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Limited Liability Company Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2011

1. ID No. 000160335

- 2. Exact Name of the Limited Liability Company Benchmark GPT LLC
- 3. State of Formation

State: DE

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

ASSISTED LIVING COMMUNITY

5. Principal Office Address

No. and Street: ATTN: ACCOUNTING

40 WILLIAM STREET, SUITE 350

City or Town: WELLESLEY State: \underline{MA} Zip: $\underline{02481}$ Country: \underline{USA}

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: BENCHMARK SENIRO LIVING LLC Contact Title:

No. and Street: 40 WILLIAM STREET, SUITE 350

City or Town: WELLESLEY State: MA Zip: 02481 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	THOMAS GRAPE	40 WILLIAM ST. STE 350 WELLESLEY, MA 02481 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CT CORPORATION SYSTEM 10 WEYBOSSET STREET PROVIDENCE, RI 02903

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 27 Day of September, 2011 at 2:15:20 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By THOMAS H. GRAPE

Signature of Authorized Person

Form No. 632 Revised 09/07

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