LPH MO	State of Rhode Island	and Providence Plantations	Fee: \$50.00
R.	Office of the	e Secretary of State	
Sectory of S	148 V Provider	Df Business Services W. River Street ace RI 02904-2615 1) 222-3040	
imited Liabilit	ty Company		
Annual Report	· · ·		
ïle its annual repoi	R.I.G.L. 7-16-66(d), each limited li rt within thirty (30) days after the tin ubject to a penalty fee of \$25.00.	ability company failing or refusing to ne prescribed by law (R.I.G.L.	
ANNUAL REPOR	T YEAR: <u>2011</u>		
1. ID No. <u>000</u>	0160333		
2. Exact Name of	of the Limited Liability Company	Benchmark GPT Warwick LLC	
3. State of Form	nation		
State: <u>DE</u>			
		ness Which is Actually Conducted in Ince and other wise invest in real prope	
5. Principal Offic	e Address		
No. and Street:	40 WILLIAM ST STE 350		
	ATTN ACCOUNTING		
City or Town:	WELLESLEY	State: <u>MA</u> Zip: <u>02481</u>	Country: <u>USA</u>
6. Mailing Addre	ss of Limited Liability Company	and Name or Title of Contact Perso	n:
Contact Name: (Contact Title:		
No. and Street: 40 WILLIAM STREET, SUITE 350			
City or Town:	WELLESLEY	State: <u>MA</u> Zip: <u>02481</u>	Country: <u>USA</u>
7. Name and Add DO NOT LIST		mited Liability Company, if Applical	ble.
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	de, Country
MANAGER	THOMAS H. GRAPE	BENCHMARK ASSISTED LIVING 40 WILLIA WELLESLEY, MA 02481 U	

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 2:32:43 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 <u>THOMAS H. GRAPE</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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