



The Commonwealth of Massachusetts
William Francis Galvin

Minimum Fee: \$500.00

Secretary of the Commonwealth, Corporations Division
One Ashburton Place, 17th floor
Boston, MA 02108-1512
Telephone: (617) 727-9640

Annual Report

(General Laws, Chapter)

Federal Employer Identification Number: 204668732 (must be 9 digits)

Annual Report Filing Year: 2011

1.a. Exact name of the limited liability company: CAMMACK LARHETTE ADVISORS, LLC

1.b. The exact name of the limited liability company as amended, is: CAMMACK LARHETTE ADVISORS, LLC

2a. Location of its principal office:

No. and Street: 65 WILLIAM ST., SUITE 100
City or Town: WELLESLEY State: MA Zip: 02481 Country: USA

2b. Street address of the office in the Commonwealth at which the records will be maintained:

No. and Street: 65 WILLIAM ST, SUITE 100
City or Town: WELLESLEY State: MA Zip: 02481 Country: USA

3. The general character of business, and if the limited liability company is organized to render professional service, the service to be rendered:
INVESTMENT ADVICE TO PENSION PLANS

4. The latest date of dissolution, if specified:

5. Name and address of the Resident Agent:

Name: NATIONAL REGISTERED AGENTS, INC.
No. and Street: 303 CONGRESS STREET
2ND FLOOR
City or Town: BOSTON State: MA Zip: 02210 Country: USA

6. The name and business address of each manager, if any:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
MANAGER	CHARLES W. CAMMACK ASSOCIATES, INC.	2 RECTOR ST., 23RD FLOOR NEW YORK, NY 10006 USA
MANAGER	EMILE J. SCHOFFELEN	2 RECTOR ST., 23RD FLOOR NEW YORK, NY 10006 USA

7. The name and business address of the person(s) in addition to the manager(s), authorized to execute documents to be filed with the Corporations Division, and at least one person shall be named if there are no managers.

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
SOC SIGNATORY	MICHAEL RICHARD CARTER	65 WILLIAM ST., SUITE 100 WELLESLEY, MA 02481 USA

8. The name and business address of the person(s) authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
REAL PROPERTY	CHARLES W. CAMMACK ASSOCIATES, INC.	2 RECTOR ST., 23RD FLOOR NEW YORK, NY 10006 USA
REAL PROPERTY	EMILE J. SCHOFFELEN	2 RECTOR ST., 23RD FLOOR NEW YORK, NY 10006 USA

9. Additional matters:

SIGNED UNDER THE PENALTIES OF PERJURY, this 24 Day of March, 2011,
MICHAEL CARTER , Signature of Authorized Signatory.