



**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: 2017**

**1. ID No. 000572779**

**2. Exact Name of the Limited Liability Company PBE COMPANIES, LLC**

**3. State of Formation**

State: DE

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

531390

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

PURCHASE, SELL AND HOLD REAL ESTATE

**5. Principal Office Address**

No. and Street: 2711 CENTERVILLE ROAD, SUITE 400

City or Town: WILMINGTON

State: DE Zip: 19808 Country: USA

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

Contact Name: MANUEL VALES Contact Title: VP

No. and Street: C/O SANTANDER BANK, ONE FINANCIAL PLAZA-4TH FLOOR  
MC:R11-TWR-04-30

City or Town: PROVIDENCE

State: RI Zip: 02903 Country: USA

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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	MANUEL J. VALES IV	ONE FINANCIAL PLAZA PROVIDENCE, RI 02903 USA

MANAGER	LORI S. BLONDER	3 TERRY DRIVE NEWTOWN, PA 18940 USA
MANAGER	STEVEN J. MORRIS	19 PLEASANT STREET WOBURN, MA 01801 USA

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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

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

**Signed this 16 Day of October, 2017 at 11:50:19 AM 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 WILLIAM SCHWARTZ

Signature of Authorized Person

Form No. 632  
Revised 09/07

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