



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

Annual Report for the year: 2019  
Corporation

- Filing period: January 1 - March 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS  
2019 FEB 21 AM 11:36

1. Entity ID Number <b>000045587</b>		2. Exact name of the Corporation <b>Cormorant Cottage Inc</b>	
3. Principal Office Address <b>Champlin Road</b>		City <b>Block Island</b>	State <b>RI</b>
		Zip <b>02807</b>	
4. NAICS Code <b>531391</b>	6. Brief description of the character of business conducted in Rhode Island <b>Real estate ownership and management</b>		
5. State of Incorporation <b>RI</b>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>Renwick Case</b>		Vice-President Name <b>Shannon Case</b>	
Street Address <b>82 East Street</b>		Street Address <b>82 East Street</b>	
City <b>South Salem</b>	State <b>NY</b>	City <b>South Salem</b>	State <b>NY</b>
Zip <b>10590-2505</b>		Zip <b>10590-2505</b>	
Secretary Name <b>Shannon Case</b>		Treasurer Name <b>Shannon Case</b>	
Street Address <b>82 East Street</b>		Street Address <b>82 East Street</b>	
City <b>South Salem</b>	State <b>NY</b>	City <b>South Salem</b>	State <b>NY</b>
Zip <b>10590-2505</b>		Zip <b>10590-2505</b>	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>Renwick Case</b>		Director Name <b>Shannon Case</b>	
Street Address <b>82 East Street</b>		Street Address <b>82 East Street</b>	
City <b>South Salem</b>	State <b>NY</b>	City <b>South Salem</b>	State <b>NY</b>
Zip <b>10590</b>		Zip <b>10590-2505</b>	
Director Name <b>Juliette Case</b>		Director Name	
Street Address <b>82 East Street</b>		Street Address	
City <b>South Salem</b>	State <b>NY</b>	City	State
Zip <b>10590-2505</b>		Zip	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
		NUMBER OF SHARES CLASS/SERIES PAR VALUE	
		<b>100 A 1.00</b>	
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. <b>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.</b>			
Name of Authorized Representative <b>Elliot Taubman</b>		Date <b>2/18/2019</b>	
Signature of Authorized Representative <b>Elliot Taubman</b>			

SECT. 15-1-1.1 FILED

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

FEB 21 2019

BY **9V4ZK**  
**A.A. 11:38 AM**

FORM 630 - Revised: 10/2017