



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

Annual Report for the year: 2019  
Limited Liability Company

- Filing period: September 1 - November 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number <u>000113059</u>		2. Exact name of the Limited Liability Company <u>S-BNK CUMBERLAND LLC</u>			
3. NAICS Code <u>531110</u>		4. Brief description of the character of business conducted in Rhode Island <u>REAL ESTATE</u>			
5. State of Formation <u>DE</u>					
6. Principal Office Address <u>310 Broad Street</u>			City <u>Cumberland</u>	State <u>RI</u>	Zip <u>02864</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Sidney Kohl</u>			Contact Title <u>owner</u>		
Street Address <u>340 Royal Poinciana Way Ste 338</u>			City <u>Palm Beach</u>	State <u>FL</u>	Zip <u>33480</u>
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <u>Sidney Kohl</u>			Manager Name		
Street Address <u>340 Royal Poinciana Way Suite 338</u>			Street Address		
City <u>Palm Beach</u>	State <u>FL</u>	Zip <u>33480</u>	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<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 Person <u>Sidney Kohl</u>				Date <u>8-26-19</u>	
Signature of Authorized Person <u>[Signature]</u>				SIGN DOCUMENT HERE	

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

FILED

AUG 29 2019

BY 4301

FORM 632 - Revised: 10/2017

[Signature]