

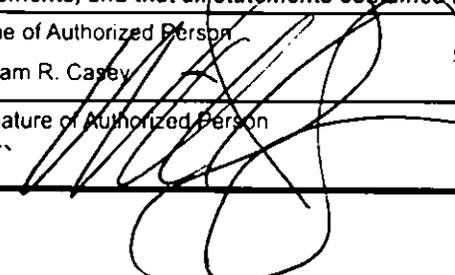


State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**FILED STAMP**  
 SEP 27 2019  
 400  
FOR CLERK OF STATE USE ONLY

**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 542660		2. Exact name of the Limited Liability Company SB Enterprises, LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island purchase, hold and sell real estate and personal property			
5. State of Formation Rhode Island					
6. Principal Office Address 1 Spring Wharf			City Newport	State RI	Zip 02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name William R. Casey			Contact Title Operations Mgr		
Street Address 1 Spring Wharf			City Newport	State RI	Zip 02840
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	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 William R. Casey				Date 9/24/19	
Signature of Authorized Person 				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