



State of Rhode Island  
**Department of State - Business Services Division**

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 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
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 2022 APR 18 A 8:38  
FOR SECRETARY OF STATE OFFICE ONLY

**Annual Report for the year: 2021 Corporation**

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number <b>201752340220</b>		2. Exact name of the Corporation <b>ENGS COMMERCIAL FINANCE CO.</b>			
3. Principal Office Address <b>ONE PIERCE PLACE, SUITE 1100</b>			City <b>ITASCA</b>	State <b>IL</b>	Zip <b>60143</b>
4. NAICS Code <b>522220</b>		6. Brief description of the character of business conducted in Rhode Island <b>FINANCE COMMERCIAL MOTOR VEHICLES AND TANGIBLE PERSONAL PROPERTY</b>			
5. State of Incorporation <b>CA</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>CRAIG WEINEWUTH</b>			Vice-President Name <b>JAMES FREUND</b>		
Street Address <b>ONE PIERCE PLACE, SUITE 1100</b>			Street Address <b>ONE PIERCE PLACE, SUITE 1100</b>		
City <b>ITASCA</b>	State <b>IL</b>	Zip <b>60143</b>	City <b>ITASCA</b>	State <b>IL</b>	Zip <b>60143</b>
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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>CRAIG WEINEWUTH</b>			Director Name <b>JAMES FREUND</b>		
Street Address <b>ONE PIERCE PLACE, SUITE 1100</b>			Street Address <b>ONE PIERCE PLACE, SUITE 1100</b>		
City <b>ITASCA</b>	State <b>IL</b>	Zip <b>60143</b>	City <b>ITASCA</b>	State <b>IL</b>	Zip <b>60143</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		<b>1,500,000</b>		<b>COMMON</b>	<b>.01 PER SHARE</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>SCOTT FRANKLIN</b>					Date <b>4-15-2022</b>
Signature of Authorized Representative <i>Scott Franklin</i>					

**FILED**

**APR 18 2022**  
*53PNH*

**8:39**