



**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: 2012

1. ID No. 000126163

2. Exact Name of the Limited Liability Company Mercury Claims & Assistance of Wisconsin, LLC

3. State of Formation

State: WI

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

INSURANCE AGENCY WHICH SELLS TRAVEL INSURANCE

5. Principal Office Address

No. and Street: 3300 BUSINESS PARK DRIVE

City or Town: STEVENS POINT

State: WI

Zip: 54482

Country: USA

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

Contact Name: Contact Title:

No. and Street: 175 WATER STREET, 18TH FLOOR

City or Town: NEW YORK

State: NY

Zip: 10038

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	SUSAN M. CLARKE	180 MAIDEN LANE, 27TH FLOOR NEW YORK, NY 10038 USA
MANAGER	JEFFREY C. RUTLEDGE	175 WATER STREET NEW YORK, NY 10038 USA
MANAGER	DEAN S. SIVLEY	3300 BUSINESS PARK DRIVE STEVENS POINT, WI 54482 USA
MANAGER	JAMES D. PAGE	101 HUDSON STREET JERSEY CITY, NJ 07302 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 8 Day of October, 2012 at 4:32:55 PM 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 SUSAN M. CLARKE
Signature of Authorized Person

Form No. 632
Revised 09/07

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