



**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

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2013

1. Corporate ID No. 000266377

2. Name of Corporation DVM Insurance Agency

3. Street Address Principal Business Office:

No. and Street: 1800 E. IMPERIAL HIGHWAY, SUITE 145

City or Town: BREA

State: CA Zip: 92821 Country: USA

4. Business Phone No.

714-989-0555

5. State of Incorporation

State: CA

6. Brief Description of the Character of Business Conducted in Rhode Island

PET HEALTH INSURANCE PROVIDER

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	MICHAEL FUNCK	1800 E. IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 US
SECRETARY	ROBERT HORNER III	1800 E. IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 US
ASSOCIATE VICE PRESIDENT	DEBORAH CARTER	1800 E. IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 USA
ASSISTANT SECRETARY	PHIL GREVIN	1800 E. IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 US
VICE PRESIDENT	JONATHAN KASS	1800 E. IMPERIAL HIGHWAY, SUITE 145

		BREA, CA 92821 US
PRESIDENT	SCOTT LILES	1800 E. IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 US
DIRECTOR	SCOTT LILES	1800 E. IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 US
DIRECTOR	KEITH GOAD	1800 E. IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 US
DIRECTOR	TERRI HILL	1800 E. IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 US
DIRECTOR	MICHAEL MILLER	1800 E. IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 US

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	1.00	1

9. 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.

Signed this 2 Day of January, 2013 at 12:04:34 PM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By CHAS M. KIDDER
Signature of Authorized Representative of the Corporation

COMPLIANCE ANALYST
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

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