



**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. 000164844

2. Name of Corporation Proctor Financial, Inc.

3. Street Address Principal Business Office:

No. and Street: 5225 CROOKS RD

City or Town: TROY

State: MI

Zip: 48098

Country: USA

4. Business Phone No.

5. State of Incorporation

State: MI

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

To engage in all lines of insurance-related business as an insurance agent/broker.

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	RACHEL PORTO	30A VREELAND RD FLORHAM PARK, NJ 07932 USA
VICE PRESIDENT & SECRETARY	LAUREL L GRAMMIG	655 N FRANKLIN ST SUITE 1900 TAMPA, FL 33602 USA
PRESIDENT	PAUL A GLANTZ	5225 CROOKS RD TROY, MI 48098 USA
VICE PRESIDENT FINANCE	MOHAMED ELEWA	5225 CROOKS RD TROY, MI 48098 USA
DIRECTOR	KENNETH R MASTERS	681 S PARKER ST, SUITE 300

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>
CWP	A	\$10.0000	1,000.00	867
CWP	B	\$10.0000	30,000.00	7803

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 27 Day of February, 2013 at 2:29:24 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 LAUREL L GRAMMIG

Signature of Authorized Representative of the Corporation

VP & SECRETARY

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

© 2007 - 2013 State of Rhode Island and Providence Plantations
All Rights Reserved