



**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. 000140348

2. Name of Corporation Program Management Services, Inc.

3. Street Address Principal Business Office:

No. and Street: 655 N FRANKLIN ST, SUITE 1900

City or Town: TAMPA

State: FL Zip: 33602 Country: USA

4. Business Phone No.

5. State of Incorporation

State: FL

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
DIRECTOR & PRESIDENT	ANTHONY T STRIANESE	303 CORPORATE CENTER DR, SUITE 300 STOCKBRIDGE, GA 30281 USA
VICE PRESIDENT	CORY T WALKER	220 S. RIDGEWOOD AVE DAYTONA BEACH, FL 32114 USA
TREASURER	JOSEPH FAILLA	220 S. RIDGEWOOD AVE DAYTONA BEACH , FL 32114 USA
EXECUTIVE VICE PRESIDENT	KARL F SNEARER	201 CONCOURSE BLVD SUITE 260 GLEN ALLEN, VA 23060 USA

VICE PRESIDENT & SECRETARY

LAUREL L GRAMMIG

655 N FRANKLIN ST SUITE 1900
TAMPA, FL 33602 USA

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		\$1.0000	2,500.00	2500

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 2:34:24 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

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