



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: 2014

1. Corporate ID No. 000164154

2. Name of Corporation Advance Insurance Agency, Inc.

3. Street Address Principal Business Office:

No. and Street: 5241 VIKING DRIVE

City or Town: EDINA

State: MN

Zip: 55435

Country: USA

4. Business Phone No.

952-831-1928

5. State of Incorporation

State: MN

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

INSURANCE SALES

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
VICE PRESIDENT	RICHARD F MCKENNY	15292 FLOWER WAY APPLE VALLEY, MN 55124 USA
PRESIDENT	JAY LARSON	238 MALLARD DRIVE SHAKOPEE, MN 55379- USA
SECY/TREAS	RICKY J SIREK	2171 OVERLOOK DR BLOOMINGTON, MN 55431 USA
DIRECTOR	JAY R LARSON	238 MALLARD DR SHAKOPEE, MN 55379 USA
DIRECTOR	RICHARD F MCKENNY	15292 FLOWER WAY

		APPLE VALLEY, MN 55124 USA
DIRECTOR	RICK J SIREK	2171 OVERLOOK DR BLOOMINGTON, MN 55431 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>
CNP		\$0.0000	25,000.00	600

**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 21 Day of January, 2014 at 1:29:13 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 RICKY J SIREK  
Signature of Authorized Representative of the Corporation

SECY-TREASURER  
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 - 2014 State of Rhode Island and Providence Plantations  
All Rights Reserved