



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. 000147994

2. Name of Corporation ADVANCED INSURANCE COVERAGES, INC.

3. Street Address Principal Business Office:

No. and Street: 7301 WILES ROAD
SUITE 202

City or Town: CORAL SPRINGS State: FL Zip: 33067 Country: USA

4. Business Phone No.

888-281-0684

5. State of Incorporation

State: FL

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

Insurance Services

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
PRESIDENT	KEITH BROWN	555 CORPORATE DRIVE KALISPELL, MT 59901 USA
TREASURER	DAVID DECLARK	250 N. SUNNY SLOPE ROAD, SUITE 110 BROOKFIELD, WI 53005 USA
SECRETARY	JULIA A. JENSEN	250 N. SUNNY SLOPE ROAD, SUITE 110 BROOKFIELD, WI 53005 USA
ASSISTANT TREASURER	MICHAEL LEMONS	555 CORPORATE DRIVE KALISPELL, MT 59901 USA

VICE PRESIDENT	PAMELA B. GERALD	7301 WILES ROAD, SUITE 202 CORAL SPRINGS, FL 33067 USA
CONTROLLER	DAVID TOEPEL	250 N. SUNNY SLOPE ROAD, SUITE 110 BROOKFIELD, WI 53005 USA
DIRECTOR	KENNETH L. DOWD JR.	250 N. SUNNY SLOPE ROAD, SUITE 110 BROOKFIELD, WI 53005 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	500.00	100

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 25 Day of February, 2014 at 2:19:23 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 JULIA A. JENSEN
Signature of Authorized Representative of the Corporation

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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