



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

**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: 2016

1. Corporate ID No. 000115909

2. Name of Corporation The Virtus Group, Insurance and Financial Services, Inc.

3. Street Address Principal Business Office:

No. and Street: 10 MEMORIAL BOULEVARD
SUITE 903

City or Town: PROVIDENCE

State: RI Zip: 02903 Country: USA

4. Business Phone No.

4012230500

5. State of Incorporation

State: RI

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

TO PROVIDE INSURANCE AND FINANCIAL SERVICES TO THE PUBLIC

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	DEREK D. DOO	10 MEMORIAL BOULEVARD, SUITE 903 PROVIDENCE, RI 02903 USA
TREASURER	DEREK D. DOO	10 MEMORIAL BOULEVARD, SUITE 903 PROVIDENCE, RI 02903 USA
SECRETARY	KEITH PEACOCK	10 MEMORIAL BOULEVARD, SUITE 903 PROVIDENCE, RI 02903 USA
CFO	DEREK D. DOO	10 MEMORIAL BOULEVARD, SUITE 903

		PROVIDENCE, RI 02903 USA
VICE PRESIDENT	MARK S. CRUISE	10 MEMORIAL BOULEVARD, SUITE 903 PROVIDENCE, RI 02903 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		\$0.0100	8,000.00	150

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 14 Day of January, 2016 at 11:18:42 AM. *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 W. THOMAS HUMPHREYS
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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