



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: 2016

1. Corporate ID No. 000793619

2. Name of Corporation ALLIED SPECIALTY INSURANCE, INC.

3. Street Address Principal Business Office:

No. and Street: 10451 GULF BOULEVARD

City or Town: TREASURE ISLAND

State: FL

Zip: 33706

Country: USA

4. Business Phone No.

727-367-6900

5. State of Incorporation

State: FL

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
PRESIDENT	MARY C SMITH	10451 GULF BLVD. TREASURE ISLAND, FL 33706 US
TREASURER	SHARON KEEFE	10451 GULF BOULEVARD TREASURE ISLAND, FL 33706 US
SECRETARY	SHARON L KEEFE	10451 GULF BOULEVARD TREASURE ISLAND, FL 33706 US
VICE PRESIDENT	CAROL A SERRA	10451 GULF BLVD. TREASURE ISLAND, FL 33706 US
VICE PRESIDENT	SUSAN VEREKER	10451 GULF BLVD.

VICE PRESIDENT	SHERRIE CALHOUN	TREASURE ISLAND, FL 33706 US 10451 GULF BLVD. TREASURE ISLAND, FL 33706 US
DIRECTOR	SHARON L KEEFE	10451 GULF BOULEVARD TREASURE ISLAND, FL 33706 US
DIRECTOR	ROBERT C LAMB JR.	10451 GULF BOULEVARD TREASURE ISLAND, FL 33706 US
DIRECTOR	MARY C SMITH	10451 GULF BLVD. TREASURE ISLAND, FL 33706 US

**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	10,000.00	10000

**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 18 Day of January, 2016 at 11:52:50 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 LISA CUMMINGS  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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