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. 000024035

2. Name of Corporation WESTERN STAR INSURANCE SERVICES, INC.

3. Street Address Principal Business Office:

No. and Street: 5600 BEACH TREE LANE
City or Town: CALEDONIA State: MI Zip: 49316 Country: USA

4. Business Phone No.

616-956-3750

5. State of Incorporation

State: TX

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

NONE

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	STEPHEN J BOSHOVEN	5600 BEECH TREE LANE CALEDONIA, MI 49316 USA
TREASURER	JEFFREY L PEPPER	5600 BEECH TREE LANE CALEDONIA, MI 49316 USA
SECRETARY	MARTIN R BROWN	5600 BEECH TREE LANE CALEDONIA, MI 49316 USA
VICE PRESIDENT	MICHAEL J COK	5600 BEECH TREE LANE CALEDONIA, MI 49316 USA
DIRECTOR	DEBORAH A BOAM	4005 DOMINION COVE

		AUSTIN, TX 78759 USA
DIRECTOR	STEPHEN J BOSHOVEN	5600 BEECH TREE LANE CALEDONIA, MI 49316 USA
DIRECTOR	MICHAEL J COK	5600 BEECH TREE LANE CALEDONIA, MI 49316 USA
DIRECTOR	JEFFREY L PEPPER	5600 BEECH TREE LANE CALEDONIA, MI 49316 USA
DIRECTOR	RANDALL ROBSON	5600 BEECH TREE LANE CALEDONIA, MI 49316 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
CWP		$1.0000	10,000.00	1000

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 29 Day of January, 2016 at 2:07:13 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 MERIKAY WIERENGA
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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