

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. 000073477

2. Name of Corporation LIG Insurance Agency, Inc.

3. Street Address Principal Business Office:

No. and Street: 1905 NW CORPORATE BLVD.

City or Town: BOCA RATON State: FL Zip: 33431 Country: USA

4. Business Phone No.

561-994-1900

5. State of Incorporation

State: MO

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

GENERAL INSURANCE BROKERAGE AND AGENCY BUSINESS.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address		
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country		
PRESIDENT	JAN CARLSSON	1905 NW CORPORATE BLVD		
TDEACHDED	IAMES LOSIDIED	BOCA RATON, FL 33431 USA		
TREASURER	JAMES J POIRIER	1905 NW CORPORATE BLVD. BOCA RATON, FL 33431 USA		
SECRETARY	MINDY P APPEL	1905 NW CORPORATE BLVD BOCA RATON, FL 33431 USA		
CEO	JAN CARLSSON	1905 NW CORPORATE BLVD BOCA RATON, FL 33431 USA		
DIRECTOR	CHRISTINE E LYNN	1905 NW CORPORATE BLVD		

		BOCA RATON, FL 33431 USA	
DIRECTOR	JAN CARLSSON	1905 NW CORPORATE BLVD BOCA RATON, FL 33431 USA	
DIRECTOR	MINDY P APPEL	1905 NW CORPORATE BLVD BOCA RATON, FL 33431 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	100,000.00	5000

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 February, 2016 at 2:35:22 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 J.J. POIRIER

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations All Rights Reserved