

## 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

## **Limited Liability Company Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

000900609 1. ID No.

- 2. Exact Name of the Limited Liability Company INTELLIQUOTE INSURANCE SERVICES, LLC
- 3. State of Formation

State: DE

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

## **INSURANCE MARKETING**

5. Principal Office Address

No. and Street: 2650 MCCORMICK DRIVE, SUITE 200S

**CLEARWATER** State: FL Zip: 33759 Country: USA City or Town:

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 2650 MCCORMICK DRIVE, SUITE 200S

City or Town: <u>CLEARWATER</u> State: FL Zip: 33759 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	AL MARKETING, LLC	2650 MCCORMICK DRIVE, SUITE 200S CLEARWATER, FL 33759 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 26 Day of July, 2016 at 9:25:44 AM by the authorized person. 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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

## By TERRY DUNCAN

Signature of Authorized Person

Form No. 632 Revised 09/07

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