



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: 2017

1. ID No. 001661880

2. Exact Name of the Limited Liability Company Unity Surveillance & Investigations, LLC

3. State of Formation

State: NH

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code  561611

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

INSURANCE INVESTIGATIONS

5. Principal Office Address

No. and Street: 215 S. BROADWAY, SUITE 149

City or Town: SALEM

State: NH Zip: 03079 Country: USA

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

Contact Name: Contact Title:

No. and Street: 215 S. BROADWAY, SUITE 149

City or Town: SALEM

State: NH Zip: 03079 Country: USA

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

| Title   | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|---------|------------------------------------------------|------------------------------------------------------------|
| MANAGER | COREY PORTER                                   | 215 S. BROADWAY, SUITE 149<br>SALEM, NH 03079 USA          |

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

BRUCE BELVIN 40 WINSTON AVENUE WARWICK , RI 02886

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

**Signed this 11 Day of January, 2017 at 11:54:28 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 LEAH LAVOIE  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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