



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: 2017

1. Corporate ID No. 000487408

2. Name of Corporation RBS Citizens Insurance Agency, Inc.

3. Street Address Principal Business Office:

No. and Street: 4249 EASTON WAY

City or Town: COLUMBUS

State: OH

Zip: 43219

Country: USA

4. Business Phone No.

5. State of Incorporation

State: OH

ARTICLE III

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

NAICS Code

6

ECOIAUS

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

INSURANCE AGENCY

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
DIRECTOR	CLAIRE COSTA	4249 EASTON WAY COLUMBUS, OH 43219 USA
TREASURER	CLAIRE COSTA	4249 EASTON WAY

		COLUMBUS, OH 43219 USA
DIRECTOR	DAVID DOWLING	4249 EASTON WAY COLUMBUS, OH 43219 USA
SECRETARY	GARY ASHJIAN	4249 EASTON WAY COLUMBUS, OH 43219 USA
DIRECTOR	PETER DUNLAP	4249 EASTON WAY COLUMBUS, OH 43219 USA
PRESIDENT	PETER DUNLAP	4249 EASTON WAY COLUMBUS, OH 43219 USA

### 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>
CNP		\$0.0000	750.00	747

**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 30 Day of January, 2017 at 11:17:15 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 GARY A ASHJIAN  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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