



**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. 000910595

2. Name of Corporation Cook & Company Insurance Services, Inc.

3. Street Address Principal Business Office:

No. and Street: 1025 PLAIN STREET

City or Town: MARSHFIELD

State: MA

Zip: 02050

Country: USA

4. Business Phone No.

5. State of Incorporation

State: MA

ARTICLE III

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

NAICS Code

6

81

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

TO ACT EXCLUSIVELY AS AN INSURANCE BROKER OR AGENT UNDER THE
PROVISIONS OF
THE MASSACHUSETTS GENERAL LAWS, CHAPTER 175, SECTION 174 AND ALL ACTS IN
AMENDMENT THEREOF

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	SUSAN SHILLUE	1025 PLAIN STREET MARSHFIELD, MA 02050 USA
SECRETARY	LOAN NISSER	485 MADISON AVENUE, 14TH FLOOR NEW YORK, NY 10022 USA
CEO	ROBERT J. STUBBE	1241 JOHN Q. HAMMONDS DRIVE, 5TH FL. MADISON, WI 53717 USA
CFO	GAIL MCNULTY	1025 PLAIN STREET MARSHFIELD, MA 02050 USA
DIRECTOR	TERESA A. HERBERT	485 MADISON AVENUE, 14TH FLOOR NEW YORK, NY 10022 USA
DIRECTOR	DAVID T. KETTIG	485 MADISON AVENUE, 14TH FLOOR NEW YORK, NY 10022 USA
DIRECTOR	LARRY R. GRABER	12007 RESEARCH BLVD., STE. 201 AUSTIN, TX 78759 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	6,000,000.00	0

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 13 Day of February, 2017 at 8:43:14 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 KELLY LETTMANN
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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