

State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$50.00

52

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. 001065162
- **2.** Name of Corporation Buckeyebranch Inc.
- 3. Street Address Principal Business Office:

No. and Street: 35 WEST MAIN STREET

City or Town: ALLEGANY State: NY Zip: 14706 Country: USA

4. Business Phone No.

7163735511

5. State of Incorporation

State: NY

ARTICLE III

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

NAICS Code 6

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

INSURANCE AGGEGATOR

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	
PRESIDENT	LAURIE A. BRANCH	304 VAN BUREN AVENUYE OLEAN, NY 14760 USA	
TREASURER	LAURIE A BRANCH	304 VAN BUREN	

		OLEAN, NY 14760 USA		
SECRETARY	AMY L BRANCH BENOLIEL	520 EAST GRAVERS LANE WYNDMOOR, PA 19038 USA		
ASSISTANT SECRETARY	LAURIE A BRANCH	304 VAN BUREN AVE OLEAN, NY 14760 USA		
VICE PRESIDENT	JOSEPH G CHIAPUSO	1910 WINDFALL OLEAN, NY 14760 USA		
DIRECTOR	JOSEPH G CHIAPUSO	1910 WINDFALL OLEAN, NY 14760 USA		
DIRECTOR	LAURIE A BRANCH	1132 QUEEN ST OLEAN, NY 14760 USA		
DIRECTOR	AMY L BRANCH BENOLIEL	520 EAST GRAVERS KABE WYNDMOOR, PA 19038 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
CNP		\$0.0000	200.00	100

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 3:14:19 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 LAURIE A BRANCH

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved