State	of Rhode Island and Pro		Fee: \$50.00			
Office of the Secretary of State Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040						
Foreign Business Corpor Annual Report Filing Period: January 1 - March 1						
In accordance with R.I.G.L. 7-1.2 annual report within thirty (30) day (c&d)) is subject to a penalty fee	s after the time prescribed by					
ANNUAL REPORT YEAR: 2017						
1. Corporate ID No. 000962157						
2. Name of Corporation Iroquois South Inc.						
3. Street Address Principal Business Office:						
No. and Street:2711 CENTERVILLE ROAD, SUITE 400City or Town:WILMINGTONState: DEZip:19808Country: USA						
4. Business Phone No.						
<u>7163735511</u>						
5. State of Incorporation						
State: <u>DE</u>						
ARTICLE III						
Using the following NAICS code	s, please select the code that t	est describes your business.				
NAICS Code	NAICS Code <u>52</u>					
6. Brief Description of the Cha	racter of Business Conducte	d in Rhode Island				
INSURANCE AGGREGATO	<u>R</u>					
7. Names and Addresses of th	e Officers and Directors:					
All officers and directors must be listed.						
Title	Individual Name	Address				
PRESIDENT	First, Middle, Last, Suffix MATTHEW L. WARD	Address, City or Town, State, Zip Co				
		11202 BUCKHEAD CC MIDLOTHIAN, VA 23112 U				
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 OLEAN, NY 14760 USA	
VICE PRESIDENT	JOSEPH G CHIAPUSO	1910 WINDFALL OLEAN, NY 14760 USA	
DIRECTOR	JOSEPH G CHIAPUSO	1910 WINDFALL RD OLEAN, NY 14760 USA	
DIRECTOR	LAURIE A BRANCH	1132 QUEEN ST OLEAN, NY 14760 USA	
DIRECTOR	AMY L BRANCH BENOLIEL	520 EAST GRAVERS LANE WYNDMOOR, PA 19038 USA	
DIRECTOR	LAURIE A BRANCH	304 VAN BUREN OLEAN, NY 14760 USA	
DIRECTOR	MATTHEW L WARD	11202 BUCKHEAD COURT MIDLOTHIAN, VA 23112 USA	

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
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 3:50:21 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

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