



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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Annual Report for the year: 2017
Limited Liability Company

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000943973		2. Exact name of the Limited Liability Company Liberty Mutual Auto and Home Services LLC			
3. NAICS Code 52 - Finance and Insurance		4. Brief description of the character of business conducted in Rhode Island Insurance			
5. State of Formation MA					
6. Principal Office Address 175 BERKELEY STREET		City BOSTON	State MA	Zip 02116	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name GINA HUDSON			Contact Title REGULATORY SPECIALIST		
Street Address 175 BERKELEY STREET		City BOSTON	State MA	Zip 02116	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name JULIE M. HAASE			Manager Name ANTHONY R. STORM		
Street Address 175 BERKELEY STREET			Street Address 175 BERKELEY STREET		
City BOSTON	State MA	Zip 02116	City BOSTON	State MA	Zip 02116
Manager Name JAMES M. MACPHEE			Manager Name		
Street Address 175 BERKELEY STREET			Street Address		
City BOSTON	State MA	Zip 02116	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person GINA HUDSON				Date 7/19/2017	
Signature of Authorized Person 					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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