State of	of Rhode Island and Pro Office of the Secreta		).00				
HORE	Division Of Business 148 W. River S Providence RI 0290 (401) 222-30	treet 04-2615					
	· · ·						
Foreign Business Corpora 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 o	s after the time prescribed by I						
ANNUAL REPORT YEAR: 2019							
1. Corporate ID No. 001663227							
2. Name of Corporation Sandy Spring Insurance Corporation							
3. Street Address Principal Business Office:							
No. and Street:170 JENNIFER ROAD, SUITE 200City or Town:ANNAPOLISState:MDZip:21401Country:USA							
4. Business Phone No.							
<u>410-897-5800</u>							
5. State of Incorporation							
State: MD							
	ARTICLE III						
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.							
<u>524210</u>							
6. Brief Description of the Char	racter of Business Conducte	d in Rhode Island					
NON-RESIDENT INSURANCE SALES							
7. Names and Addresses of the	e Officers and Directors:						
All officers and directors must be listed.							
Title	Individual Name	Address					
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country					
PRESIDENT	TODD ELLIS	170 JENNIFER ROAD, SUITE 200 ANNAPOLIS, MD 21401 USA					
TREASURER	JOSEPH DENNIS	170 JENNIFER ROAD, SUITE 200					

		ANNAPOLIS, MD 21401 USA	
SECRETARY	RONALD KUYKENDALL	170 JENNIFER ROAD, SUITE 200 ANNAPOLIS, MD 21401 USA	
VICE PRESIDENT	CAROLYN ROBEY	170 JENNIFER ROAD, SUITE 200 ANNAPOLIS, MD 21401 USA	
DIRECTOR	ROBERT L ORNDORFF	170 JENNIFER ROAD, SUITE 200 ANNAPOLIS, MD 21401 USA	
DIRECTOR	DANIEL J SCHRIDER	170 JENNIFER ROAD, SUITE 200 ANNAPOLIS, MD 21401 USA	
DIRECTOR	MARK E FRIIS	170 JENNIFER ROAD, SUITE 200 ANNAPOLIS, MD 21401 USA	
DIRECTOR	R LOUIS CACERES	170 JENNIFER ROAD, SUITE 200 ANNAPOLIS, MD 21401 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 <i>Num of</i> <i>Shares</i>
CNP		\$0.0000	5,000.00	5000

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 17 Day of January, 2019 at 11:39:38 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 TODD ELLIS

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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