



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

Annual Report for the year: 2019
Corporation

- Filing period: January 1 - March 1
 → Filing Fee: \$50.00
 → Penalty: Additional \$25.00 fee if form is not filed by April 1.

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV
 2019 FEB 14 AM 10:26

1. Entity ID Number 001662566		2. Exact name of the Corporation SIGNET SERVICE PLANS INC			
3. Principal Office Address 375 GHENT ROAD			City AKRON	State OH	Zip 44333
4. NAICS Code 524128		6. Brief description of the character of business conducted in Rhode Island INSURANCE			
5. State of Incorporation OHIO					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input checked="" type="checkbox"/>
President Name PLEASE SEE ATTACHED			Vice-President Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input checked="" type="checkbox"/>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		1000	CNP	0	
11. 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. 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 Representative KENNETH GOLDBERG SVP & TREASURER				Date 2/7/2019	
Signature of Authorized Representative <i>Kenneth Goldberg</i>				DOCUMENT HERE FILED FEB 14 2019 BY B3XHG A-A	

**SIGNET SERVICE PLANS, INC.
SCHEDULE OF OFFICERS**

DIRECTORS

<u>NAME</u>	<u>BUSINESS ADDRESS</u>	<u>EXPIRATION OF TERM</u>
J LYNN DENNISON	375 GHENT RD. AKRON, OH 44333	WHEN SUCCESSOR IS APPOINTED
RORY O'DONNELL	375 GHENT RD. AKRON, OH 44333	WHEN SUCCESSOR IS APPOINTED
STASH PTAK	375 GHENT RD. AKRON, OH 44333	WHEN SUCCESSOR IS APPOINTED

OFFICERS

<u>NAME</u>	<u>BUSINESS ADDRESS</u>	<u>EXPIRATION OF TERM</u>
J LYNN DENNISON PRESIDENT	375 GHENT RD. AKRON, OH 44333	WHEN SUCCESSOR IS APPOINTED
RORY O'DONNELL VICE PRESIDENT	375 GHENT RD. AKRON, OH 44333	WHEN SUCCESSOR IS APPOINTED
KENNETH GOLDBERG TREASURER	375 GHENT RD. AKRON, OH 44333	WHEN SUCCESSOR IS APPOINTED
STASH PTAK SECRETARY	375 GHENT RD. AKRON, OH 44333	WHEN SUCCESSOR IS APPOINTED