State of	of Rhode Island and Pro Office of the Secreta		Fee: \$50.00				
	Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222 2040						
HOPE	(401) 222-30	U4U					
Foreign Business Corpora Annual Report Filing Period: January 1 - March 1	ation						
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	rs after the time prescribed by I						
ANNUAL REPORT YEAR: 2020	<u>)</u>						
1. Corporate ID No. 00007	20726						
2. Name of Corporation CMI, a York Risk Services Company, Inc.							
3. Street Address Principal Bus	siness Office:						
No. and Street: <u>645 W. GRA</u> SUITE 100	AND RIVER AVE.						
City or Town: <u>HOWELL</u>	S	tate: <u>MI</u> Zip: <u>48843</u> Country	√: <u>USA</u>				
4. Business Phone No.							
<u>9734041285</u>							
5. State of Incorporation							
State: <u>DE</u>							
	ARTICLE III						
Enter the six digit NAICS Code the list of codes here. More inform		business conducted by the entity. I online.	Download				
<u>524298</u>							
6. Brief Description of the Cha	racter of Business Conducte	d in Rhode Island					
THIRD PARTY INSURANCE RELATED ADMINISTRATIVE SERVICES							
7. Names and Addresses of the	e Officers and Directors:						
All officers and directors mu	ust be listed.						
Title	Individual Name	Address					
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code	, Country				
PRESIDENT	KIMBERLY D BROWN	8125 SEDGWICK WAY MEMPHIS, TN 38125 USA					

DIRECTOR	KIMBERLY D BRO		ME	8125 SEDGWICK W MPHIS, TN 38125 US 8125 SEDGWICK W	A
DIRECTOR	STEPHEN R HURL	EY		8125 SEDGWICK W	
			8125 SEDGWICK WAY MEMPHIS, TN 38125 USA		
8. Shares Authorized and Iss	sued				
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>
CWP		\$1.0000		10,000.00	10000
Signed this 30 Day of Janu or individuals signing this in signatory, under penalties of act and deed of the corpora electronic filing, in complian By <u>KIMBERLY D. BROW</u> Signature of Authorized R	nstrument constitutes f perjury, that this ins tion, and that the fac nce with R.I. Gen. Lav <u>N</u>	the affirma strument is ts stated he ws § 7-1.2.	ation or ac that indiv erein are th	knowledgement idual's act and de	of the eed or the
Form No. 630					