



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2020

1. Corporate ID No. 000080600

2. Name of Corporation PayneWest Insurance, Inc.

3. Street Address Principal Business Office:

No. and Street: 2925 PALMER STREET, SUITE B
P.O. BOX 4386

City or Town: MISSOULA State: MT Zip: 59806 Country: USA

4. Business Phone No.

4063276432

5. State of Incorporation

State: MT

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

524210

6. Brief Description of the Character of Business Conducted in Rhode Island

DEALING IN NON-RESIDENT INSURANCE

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	ALLISON JOHNSTON	2925 PALMER STREET, SUITE B MISSOULA, MT 59808 UNI

SECRETARY	SARAH WALSH	1108 LIVINGSTON AVE HELENA, MT 59604 USA
CEO	KYLE LINGSCHIEIT	2925 PALMER ST, STE B MISSOULA, MT 59808 USA
VICE PRESIDENT	MINDY CARVER	2925 PALMER STREET MISSOULA, MT 59808 USA
DIRECTOR	TERRY PAYNE	501 PATTEE CANYON DR. MISSOULA, MT 59803 USA
DIRECTOR	PATRICK S. MCCUTCHEON	7 CLOVERVIEW DR. HELENA, MT 59604 USA
DIRECTOR	LARRY SIMKIN	PO BOX 16630 MISSOULA, MT 59601 USA
DIRECTOR	WADED CRUZADO	PO 172420 BOZEMAN, MT 59717 USA
DIRECTOR	JF SCHERER	28331 TERRAZZA LANE NAPLES, FL 34110 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$1.0000	600,000.00	441878

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 May, 2020 at 6:13:27 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 MINDY CARVER
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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