



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

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

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2020

1. ID No. 000795941

2. Exact Name of the Limited Liability Company INTERSTATE MOTOR CARRIERS/CAPACITY AGENCY, LLC

3. State of Formation

State: NJ

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

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

NON-RESIDENT INSURANCE SALES AND SERVICE.

5. Principal Office Address

No. and Street: 1963 ROUTE 34 SOUTH
BUILDING B SUITE 103/104

City or Town: WALL State: NJ Zip: 07719 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: CYNTHIA SALLAY Contact Title: COMPLIANCE OFFICER

No. and Street: 1 BLUE HILL PLAZA

City or Town: PEARL RIVER State: NY Zip: 10965 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

MANAGER	DANIEL CRAWFORD	2000 ALAMEDA DE LAS PUGLAS SAN MATEO, CA 94403 USA
MANAGER	CARL GERSON	1 BLUE HILL PLAZA PEARL RIVER, NY 10965 US
MANAGER	GARY WEINDORF	55 EAST MAIN STREET FREEHOLD, NJ 07728 USA
MANAGER	THOMAS ONEIL	1 BLUE HILL PLAZA PEARL RIVER, NY 10965 USA
MANAGER	DENISE WALSH	1 BLUE HILL PLAZA PEARL RIVER, NY 10965 USA
MANAGER	KARMAN CHAN	3000 EXECUTIVE PARKWAY SAN RAMON, CA 94583 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 8 Day of September, 2020 at 2:32:17 PM by the authorized person. *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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By CYNTHIA SALLAY
Signature of Authorized Person

Form No. 632
Revised 09/07

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