

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

Annual Report for the year: 2021  
Corporation

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

**FILED**  
OCT 20 2020  
BY 133324 *R*

1. Entity ID Number 000512566		2. Exact name of the Corporation APPALACHIAN UNDERWRITERS, INC.			
3. Principal Office Address 800 OAK RIDGE TURNPIKE SUITE A1000			City OAK RIDGE		State TN
4. NAICS Code 524210		6. Brief description of the character of business conducted in Rhode Island WHOLESALES SALES			
5. State of Incorporation TN					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment
President Name ROBERT J. AROWOOD			Vice-President Name		
Street Address 800 OAK RIDGE TURNPIKE			Street Address		
City OAK RIDGE	State TN	Zip 37830	City	State	Zip
Secretary Name WILLIAM M. AROWOOD			Treasurer Name		
Street Address 800 OAK RIDGE TURNPIKE			Street Address		
City OAK RIDGE	State TN	Zip 37830	City	State	Zip
8. List ALL directors (names and addresses)					Check the box to indicate an attachment
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
				COMMON STOCK	
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.					
<b>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.</b>					
Name of Authorized Representative <i>William M. Arowood</i>				Date OCT 14 2020	
Signature of Authorized Representative WILLIAM M. AROWOOD					

**MAIL TO:**  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov