



**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

**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: 2021

1. Corporate ID No. 001665119

2. Name of Corporation Specialty Equipment Insurance Services, Inc.

3. Street Address Principal Business Office:

No. and Street: 1 SOUTH WACKER DRIVE
SUITE 2180

City or Town: CHICAGO State: IL Zip: 60606 Country: USA

4. Business Phone No.

5. State of Incorporation

State: DE

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

SPECIALTY EQUIPMENT - WARRANTY TPA & AGENCY FOR INSURANCE SERVICES;
ENTITY USED FOR HEAVY EQUIPMENT AGENCY PLACING INSURANCE AND SERVICE
CONTRACT COVERAGE FOR HEAVY EQUIPMENT MANUFACTURERS AND DEALERS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

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

PRESIDENT	DAIVD KOCOUREK	1 SOUTH WACKER DRIVE, SUITE 2180 CHICAGO, IL 60606 USA
SECRETARY / DIRECTOR	TIMOTHY ROBB	909 THIRD AVENUE, 33RD FLOOR NEW YORK, NY 10022 USA
TREASURER/ VICE PRESIDENT	ERIN MULLOY	909 THIRD AVE, 33RD FL NEW YORK, NY 10022 USA
VICE PRESIDENT	MICHAEL T ROGERS	1605 MAIN STREET, STE 800 SARASOTA, FL 34236 USA
VICE PRESIDENT	TIMOTHY ROBB	909 THIRD AVE, 33RD FL NEW YORK, NY 10022 USA
DIRECTOR	ROBERT JAMES	909 THIRD AVENUE, 33RD FLOOR NEW YORK, NY 10022 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	A	\$5.0000	200.00	200

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 10 Day of February, 2021 at 9:44:15 AM. *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 TIMOTHY ROBB
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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