



**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. 001713427

2. Name of Corporation Provident Agency, Inc.

3. Street Address Principal Business Office:

No. and Street: 272 ALPHA DRIVE

City or Town: PITTSBURGH

State: PA

Zip: 15238

Country: USA

4. Business Phone No.

412-963-1200

5. State of Incorporation

State: PA

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.

524292

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

THIRD PARTY ADMINISTRATOR OF INSURANCE JPOLICIES IN WHICH IT WILL
TRANSACT
INSURANCE PREMIUMS IN RI

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	DAREN K DIPPOLITO	110605 CREST ROAD

		WEXFORD, PA 15090 USA
TREASURER	DANIELLE L. WEBER	373 VILLAGE DR PITTSBURGH, PA 15215 USA
SECRETARY	MARK SCHMITT	114 HUNTER DR CRANBERRY TWP, PA 16066 USA
DIRECTOR	HARRY KUNZE	6384 JACKSON ST. PITTSBURGH, PA 15206 USA
DIRECTOR	KENNETH SMITH	320 MANITO TRAIL MERCER, PA 16137 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	1,200.00	1200

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 19 Day of February, 2021 at 11:23:22 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 ROBERT DOVERSPIKE
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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