



**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: February 1 - May 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:** 2023

**1. Corporate ID No.** 000132796

**2. Name of Corporation** 90 Degree Benefits, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 7020 N PORT WASHINGTON RD  
SUITE 206

City or Town: GLENDALE State: WI Zip: 53217 Country: USA

**4. Business Phone No.**

4143654600

**5. State of Incorporation**

State: WI

**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**

ADMINISTRATION OF FULLY-INSURED, STOP-LOSS AND SELF-FUNDED PRODUCTS

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	BRUCE G FLUNKER	7020 N. PORT WASHINGTON ROAD, SUITE 206 GLENDALE, WI 53217 USA
TREASURER	MICHAEL L PATTERSON	450 RIVERCHASE PKWY E BIRMINGHAM, AL 35244 USA
CEO	CYNTHIA ANN SHEFFIELD	2145 FORD PKWY SUITE 200 ST PAUL, MN 55116-1912 USA
OTHER OFFICER	LORENE BENEFITS PATNODE	7020 N PORT WASHINGTON RD, SUITE 206 GLENDALE, WI 53217 UNI
DIRECTOR	JENNIFER DELAWRENCE	450 RIVERCHASE PKWY E BIRMINGHAM, AL 35244 USA
DIRECTOR	MICHELE ADAMSON	450 RIVERCHASE PKWY E ALABAMA, AL 35244 USA
DIRECTOR	EUGENE RODGERS	22322 GRAND CORNER DRIVE KATY, TX 77494 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>
CNP		\$0.0000	2,000.00	1000

**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 6 Day of February, 2023 at 1:48:20 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 BRUCE FLUNKER

Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07