

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. 000793781

2. Name of Corporation <u>Mackinaw Underwriters</u>, <u>Inc.</u>

3. Street Address Principal Business Office:

No. and Street: <u>26255 AMERICAN DRIVE</u>

City or Town: SOUTHFIELD State: MI Zip: 48034-6112 Country: USA

4. Business Phone No.

8004822726

5. State of Incorporation

State: MI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.

524210

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

INSURANCE AGENCY SERVICES

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	WILLIAM BROWN	26255 AMERICAN DRIVE SOUTHFIELD, MI 48034 USA
TREASURER	ANTHONY PHILLIPS	200 N. GRAND AVE. LANSING, MI 48933 USA
SECRETARY	BOBBI ELLIOTT	200 N. GRAND AVENUE LANSING, MI 48933 USA
DIRECTOR	TRICIA KEITH	600 EAST LAFAYETTE BOULEVARD DETROIT, MI 48226 USA
DIRECTOR	LISA CORLESS	200 N. GRAND AVE. LANSING, MI 48933 USA
DIRECTOR	ANTHONY PHILLIPS	200 N. GRAND AVENUE LANSING, MI 48933 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per	Tatal Authorizad	Total Issued and
		Share	Total Authorized	١ ١
			Shares	Num of
			Number of Shares	Shares
CWP		\$1.0000	10,000.00	10000

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 15 Day of February, 2023 at 1:42:20 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 WILLIAM BROWN

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2023 State of Rhode Island All Rights Reserved