			1				
	State of Rhode Office of the Secret		Fee: \$50.00				
	<b>Division Of Busines</b>	s Services					
	148 W. River S	Street					
	Providence RI 029						
1630	(401) 222-30	)40					
Foreign Business Corpo	ration						
Annual Report Filing Period: February 1 - M	lov 1						
Thing Fenou. Tebruary T-W							
	7-1.2-1501(e), each corporation		0				
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 - ENTER THE CURRENT YEAR 2024: 2024							
1. Corporate ID No. 000	)143093						
2. Name of Corporation Woodmen Insurance Agency, Inc.							
3. Street Address Principa	I Business Office:						
No. and Street: <u>1700</u>	FARNAM ST						
City or Town: OMA	AHA State: <u>N</u>	<u>VE</u> Zip: <u>68102</u>	Country: <u>USA</u>				
4. Business Phone No.							
5. State of Incorporation							
State: <u>NE</u>							
NAICS CODE							
	ode that best describes the prin nere. More information on <u>NAI</u>	•	· · ·				
<u>524210</u>							
6. Brief Description of the	Character of Business Condu	cted in Rhode Island	d				
GENERAL INSURANCE	AGENCY						
	of the Officers and Directors:						
All officers and directors must be listed.							
Title	Individual Name	hΔ	dress				
	First, Middle, Last, Suffix		, State, Zip Code, Country				
1							

PRESIDENT	KYLE SAVAGE	1700 FARNAM ST OMAHA, NE 68102 USA
TREASURER	ANNETTE M DEVINE	1700 FARNAM ST OMAHA, NE 68102 USA
ASSISTANT TREASURER	AARON COOPER	1700 FARNAM ST OMAHA, NE 68102 USA
VICE PRESIDENT	CHARLES DRIFFILL	1700 FARNAM ST OMAHA, NE 68102 USA
SECRETARY	JOHN SHARP	1700 FARNAM ST OMAHA, NE 68102 USA
DIRECTOR	KYLE SAVAGE	1700 FARNAM ST OMAHA, NE 68102 USA
DIRECTOR	ANNETTE M DEVINE	1700 FARNAM ST OMAHA, NE 68102 USA
DIRECTOR	TIM BUDERUS	1700 FARNAM ST OMAHA, NE 68102 USA
DIRECTOR	STEPHEN K MCMAHAN	1700 FARNAM ST OMAHA, NE 68102 USA
DIRECTOR	TIMOTHY HOULAHAN	1700 FARNAM ST OMAHA, NE 68102 USA

## 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CWP	I	\$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 7 Day of February, 2024 at 10:21:27 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 AARON COOPER

Signature of Authorized Representative of the Corporation

© 2007 - 2024 State of Rhode Island All Rights Reserved