



**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 - ENTER THE CURRENT YEAR 2024:** 2024

**1. Corporate ID No.** 001754931

**2. Name of Corporation** Vanbridge Insurance Solutions Corp.

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

No. and Street: 5022 GRAND RIDGE DRIVE

City or Town: WEST DES MOINES

State: IA

Zip: 50265

Country: USA

**4. Business Phone No.**

925-244-7720

**5. State of Incorporation**

State: IA

**NAICS CODE**

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**

INSURANCE SALES AND SERVICE

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

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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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TREASURER	FRANK MAMMARO	499 WASHINGTON BLVD, 8TH FL JERSEY CITY , NJ 07310 USA
SECRETARY	JACQUELINE BEAUDET	499 WASHINGTON BLVD, 8TH FL JERSEY CITY, NJ 07310 USA
DIRECTOR / PRESIDENT	PHIL MOYLES	1140 AVENUE OF THE AMERICAS, 8TH FLOOR NEW YORK, NY 10036 USA
DIRECTOR	DANIEL J CRAWFORD	2000 ALAMEDA DE LAS PULGAS, SUITE 125 SAN MATEO, CA 94403 USA
DIRECTOR	DENISE WALSH	1 BLUE HILL PLAZA PEARL RIVER, NY 10965 USA
DIRECTOR	STEVEN DENTON	1 CALIFORNIA ST, SUITE 400 SAN FRANCISCO, CA 94111 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	100,000.00	169

**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 3 Day of May, 2024 at 12:43:03 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 FRANK MAMMARO

Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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