



**State of Rhode Island and Providence Plantations  
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:** 2017

**1. Corporate ID No.** 000124531

**2. Name of Corporation** E\*TRADE INSURANCE SERVICES, INC.

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

No. and Street: 4500 BOHANNON DRIVE

City or Town: MENLO PARK

State: CA

Zip: 94025

Country: USA

**4. Business Phone No.**

7032368146

**5. State of Incorporation**

State: CA

**ARTICLE III**

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

52

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

INSURANCE COMPANY

**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
PRESIDENT	LENA HAAS	1271 AVENUE OF THE AMERICAS, 14TH FLOOR NEW YORK, NY 10020 USA
SECRETARY	LORI SHER	671 NORTH GLEBE ROAD

		ARLINGTON, VA 22203 USA
CFO	CHAD TURNER	671 NORTH GLEBE ROAD ARLINGTON, VA 22203 USA
DIRECTOR	MICHAEL FOLEY	1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020 USA
DIRECTOR	LENA HAAS	1271 AVENUE OF THE AMERICAS, 14TH FLOOR NEW YORK, NY 10020 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		\$0.0100	1,000.00	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 17 Day of January, 2017 at 9:13:34 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 LORI SHER  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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