



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* 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)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. <b>61033</b>		2. Name of Corporation <b>Patricia Manning Smith Agency Inc.</b>			
3. Street Address Principal Business Office <b>2790 South County Trail</b>			City <b>East Greenwich</b>	State <b>Rt</b>	Zip <b>02818</b>
4. Business Phone No. <b>401-885-1300</b>		5. State of Incorporation <b>R.S.</b>			
6. Brief Description of the Character of Business Conducted in Rhode Island <b>sales of insurance</b>					
7. NAMES AND ADDRESSES OF THE OFFICERS: (X) BOX FOR ATTACHMENT ( ) FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Patricia Manning Smith</b>			Vice President Name <b>Bruce K Smith</b>		
Street Address <b>2790 South County Trail</b>			Street Address <b>2790 South County Trail</b>		
City <b>East Greenwich</b>	State <b>Rt</b>	Zip <b>02818</b>	City <b>E. G.</b>	State <b>Rt</b>	Zip <b>02818</b>
Secretary Name <b>Patricia Manning Smith</b>			Treasurer Name <b>Bruce K Smith</b>		
Street Address <b>2790 South County Trail</b>			Street Address <b>2790 South County Trail</b>		
City <b>East Greenwich</b>	State <b>Rt</b>	Zip <b>02818</b>	City <b>East Greenwich</b>	State <b>Rt</b>	Zip <b>02818</b>
8. NAMES AND ADDRESSES OF THE DIRECTORS: (X) BOX FOR ATTACHMENT ( ) FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
10. SHARES ISSUED: (X) BOX FOR ATTACHMENT ( )					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares <b>0</b>	Class/Series <b>0</b>	Par Value <b>0</b>
			THIS SECTION MUST BE COMPLETED		
			<b>0</b>		

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.

**FILED**

AUG 13 2009

By **0596612**

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

**Patricia Manning Smith 8-4-09**

Signature **Patricia Manning Smith** Date

Print or Type Name **President**

Title

FOR SECRETARY OF STATE USE ONLY

FILED

AUG 13 2009

11:22