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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 2010

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(cer'd)) is subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation			
119979	Dowling Insurance Agency, Inc.			
3. Street Address Principal Business Office		City	State	Zip
44 Adams Street		Braintree	MA	02184
4. Business Phone No.	5. State of Incorporation			
781-848-7652	Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island				
Insurance broker.				

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	Street Address	City	State	Zip
Paul R. Dowling	44 Adams Street	Braintree	MA	02184

Vice President Name	Street Address	City	State	Zip
None				

Secretary Name	Street Address	City	State	Zip
Paul R. Dowling	44 Adams Street	Braintree	MA	02184

Treasurer Name	Street Address	City	State	Zip
John R. Dowling	1 Colonial Lane	Canton	MA	02021

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Street Address	City	State	Zip
Paul R. Dowling	44 Adams Street	Braintree	MA	02184
Elizabeth Dowling	1 Colonial Lane	Canton	MA	02021

Director Name	Street Address	City	State	Zip
John R. Dowling	1 Colonial Lane	Canton	MA	02021

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
758	Common	No par
THIS SECTION MUST BE COMPLETED		

2010 JAN 21 AM 9:33 SECRETARY OF STATE

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.

[redacted]

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

FILED
JAN 21 2010
By 108799

[redacted]

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.

Signature *Date* 1/4/09

Paul R. Dowling
Print or Type Name

President
Title

Form 630 Rev. 08/08

44202-9-436726