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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(c&d)) is subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation			
120574	McGrath Insurance Group, Inc.			
3. Street Address Principal Business Office		City	State	Zip
258 Main Street		Sturbridge	MA	01566
4. Business Phone No.	5. State of Incorporation			
	Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island				
Insurance agent and broker.				

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

President Name			Vice President Name		
Richard A. McGrath			None		
Street Address			Street Address		
31 McGregory Road					
City	State	Zip	City	State	Zip
Sturbridge	MA	01566			
Secretary Name			Treasurer Name		
Henry W. Beth			Richard A. McGrath		
Street Address			Street Address		
370 Main Street			31 McGregory Road		
City	State	Zip	City	State	Zip
Worcester	MA	01603	Sturbridge	MA	01566

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

Director Name			Director Name		
Richard A. McGrath			Henry W. Beth		
Street Address			Street Address		
31 McGregory Road			370 Main Street		
City	State	Zip	City	State	Zip
Sturbridge	MA	01566	Worcester	MA	01603
Director Name			Director Name		
Joan McGrath					
Street Address			Street Address		
31 McGregory Road					
City	State	Zip	City	State	Zip
Sturbridge	MA	01566			

9. SHARES AUTHORIZED — **10. SHARES ISSUED** *("X" BOX FOR ATTACHMENT)* ☐

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.

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100	Class A Common	No par
2,900	Class B Common	No par

THIS SECTION MUST BE COMPLETED

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]

FILED
MAR 05 2010
By MD

File Date _____
Check No. 29-113095
By: _____
FOR SECRETARY OF STATE USE ONLY

[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*

Richard A. McGrath
Print or Type Name

President
Title

45973-2-495827

Form 630 Rev. 08/08