

Filing Fee \$15.00

To be filed annually between  
January 1st and March 1st

*dup. used*  
**State of Rhode Island and Providence Plantations**

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 19559 Annual Report for the year 1988

FIRST: The name of the corporation is Lemay & Loiselles Insurance, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is INSURANCE

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 99.1 Lonsdale Avenue, Central Falls, R.I.  
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SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
John P. Loiselles	Director	337 River Rd. Lincoln, R.I.
Jeannene D. Loiselles	Director	337 River Rd. Lincoln, R.I.
Denise Douglas	Director	Westbrook, Me.
John P. Loiselles	President	337 River Rd. Lincoln, R.I.
Jeannine D. Loiselles	Vice President	337 River Rd. Lincoln, R.I.
Denise Douglas	Secretary	Westbrook, Me.
John P. Loiselles	Treasurer	337 River Rd. Lincoln, R.I.

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	No C common		none

EIGHTH: Number of Shares issued:

No. of Shares	Class	Par Value or statement that shares are without par value

**PAID**  
**MAR 07 1988**  
**SEC'Y OF STATE**

Dated 1/23/ 1988

(Name of Corporation)

By *[Signature]*

Title Pres. Treas.

(Report must be signed by an officer)