



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: 2012

1. Corporate ID No. 000120751

2. Name of Corporation NATHAN SALLOP INSURANCE AGENCY, INC.

3. Street Address Principal Business Office:

No. and Street: 25 NEW CHARDON STREET, 6TH
FLOOR

City or Town: BOSTON

State: MA Zip: 02114-4721 Country: USA

4. Business Phone No.

5. State of Incorporation

State: MA

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

SELLING OF INSURANCE

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
TREASURER	LINDA SALLOP	1415 COMMONWEALTH AVENUE WEST NEWTON, MA 02465 USA
SECRETARY	LINDA LOBAO	216 MAIN STREET CHELMSFORD, MA 01863 USA
PRESIDENT	LINDA J SALLOP	1415 COMMONWEALTH AVENUE WEST NEWTON, MA 02465- USA
VICE PRESIDENT	LUIGINA M MATARAZZO	7 CHEEVER AVE SAUGUS, MA 01906 USA
VICE PRESIDENT	ELIZABETH FINN-ELDER	46 CLIFTON HEIGHTS LANE MARBLEHEAD, MA 01945 USA
DIRECTOR	MITCHEL WEISMAN	21 WHITTER ROAD MARBLEHEAD, MA 01945 USA
DIRECTOR	JOSEPH N RUSSO	3 WINDSOR LANE BURLINGTON, MA 01803 USA
DIRECTOR	LINDA J SALLOP	1415 COMMONWEALTH AVE WEST NEWTON, MA 02465 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>
CNP		\$0.00	275,000.00	100000

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 16 Day of January, 2012 at 4:25:55 PM. *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 LUIGINA M MATARAZZO
Signature of Authorized Representative of the Corporation

VICE PRESIDENT
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

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