



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 2013

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. 103811		2. Name of Corporation Sacchetti Insurance Agency, Inc.			
3. Street Address Principal Business Office 845 Post Road			City Warwick	State RI	Zip 02888
4. Business Phone No. 401-461-0900		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island The sale and marketing of insurance, insurance services, financial services and products.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Richard P. Sacchetti			Vice President Name Richard P. Sacchetti		
Street Address 51 Conifer Drive			Street Address 51 Conifer Drive		
City North Providence	State RI	Zip 02904	City North Providence	State RI	Zip 02904
Secretary Name Richard P. Sacchetti			Treasurer Name Peter R. Sacchetti		
Street Address 51 Conifer Drive			Street Address 72 Power Road		
City North Providence	State RI	Zip 02904	City Pawtucket	State RI	Zip 02860
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Richard P. Sacchetti			Director Name		
Street Address 51 Conifer Drive			Street Address		
City North Providence	State RI	Zip 02904	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) <input type="checkbox"/>		
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 100	Class/Series Common	Par Value No Par Value
THIS SECTION			THIS SECTION		

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 a receiver or trustee.

JAN 30 2013

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

Richard P. Sacchetti

Print or Type Name

President

Title

Date

1-25-13

File Date	By: <i>mne</i>
Check No.	CL # 12535
By:	
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