



**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: 2016

1. Corporate ID No. 000126657

2. Name of Corporation Barrows Insurance Agency, Inc.

3. Street Address Principal Business Office:

No. and Street: 215 NORTH MAIN STREET

City or Town: MANSFIELD

State: MA

Zip: 02048

Country: USA

4. Business Phone No.

508-339-7260

5. State of Incorporation

State: MA

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

SELLING Property Casulty, Health, Business 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
PRESIDENT	FRED J BARROWS	215 NORTH MAIN STREET MANSFIELD, MA 02048- USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares	Total Issued and Outstanding Num of
----------------	-----------------	---------------------	----------------------------	--

			<i>Number of Shares</i>	<i>Shares</i>
STK		\$0.0000	200,000.00	200000

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 15 Day of March, 2016 at 12:08:13 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 FRED J. BARROWS

Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations
All Rights Reserved