

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

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: 2017

- 1. Corporate ID No. 000152256
- **2.** Name of Corporation Newport Insurance Agency, Inc.
- 3. Street Address Principal Business Office:

No. and Street: 460 EAST MAIN ROAD

City or Town: MIDDLETOWN State: RI Zip: 02842 Country: USA

4. Business Phone No.

401-619-1660

5. State of Incorporation

State: RI

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code



52

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

SALE OF INSURANCE PRODUCTS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID GALVIN	9 BINNEY ST NEWPORT, RI 02840- USA

VICE PRESIDENT	ROBERT J H	15 SWAN DRIVE PORTSMOUTH, RI 02871 USA
VICE PRESIDENT	MATTHEW O KIRBY	51 ASHURST AVE M, RI 02842 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
CWP		\$0.0100	100,000.00	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 4 Day of January, 2017 at 11:36:59 AM. 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 DAVID GALVIN

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved