



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

| | | | | | |
|--|--------------|---|---|---------------|--------------|
| 1. Corporate ID No. 135024 | | 2. Name of Corporation Jewell Insurance Agency, Inc. | | | |
| 3. Street Address Principal Business Office 1101 Worcester Road | | | City Framingham | State MA | Zip 01701 |
| 4. Business Phone No. 508-879-1310 | | 5. State of Incorporation MASSACHUSETTS | | | 6. SIC Code |
| 7. Brief Description of the Character of Business Conducted in Rhode Island WRITE INSURANCE IN THE STATE OF RHODE ISLAND | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name Ronald F. Jewell | | | Vice President Name Robert A. Fair | | |
| Street Address 10 Hilltop Lane | | | Street Address 656 Grove Street | | |
| City Framingham | State MA | Zip 01701 | City Framingham | State MA | Zip 01701 |
| Secretary Name Robert A. Fair | | | Treasurer Name Ronald F. Jewell | | |
| Street Address 656 Grove Street | | | Street Address 10 Hilltop Lane | | |
| City Framingham | State MA | Zip 01701 | City Framingham | State MA | Zip 01701 |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name Ronald F. Jewell | | | Director Name Robert A. Fair | | |
| Street Address 10 Hilltop Lane | | | Street Address 656 Grove Street | | |
| City Framingham | State MA | Zip 01701 | City Framingham | State MA | Zip 01701 |
| Director Name Aldea I. Jewell | | | Director Name None | | |
| Street Address 656 Grove Street | | | Street Address None | | |
| City Framingham | State MA | Zip 01701 | City None | State None | Zip None |
| 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | |
| AUTHORIZED SHARES | | | ISSUED SHARES | | |
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 7,500 COMM NO PAR VALUE | | | 7,500 | Comm | None |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date 1/14/05
Check No. 5455
By: W.
FOR SECRETARY OF STATE USE ONLY

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 hereon are true and correct.

Robert A. Fair 1/12/05
Signature of Officer Date
Robert A. Fair
Print or Type Name of Officer
Vice President
Title of Officer



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| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 3 5 0 2 4 *

File Date 2-25-09
Check No. 5326
By: IUP

FOR SECRETARY OF STATE USE ONLY

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.

Ronald F. Jewell 2-23-04
Signature of Officer Date
Ronald F. Jewell
Print or Type Name of Officer
President
Title of Officer