



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 10039		2. Name of Corporation The Thomas Insurance Agency, Inc.	
3. Street Address Principal Business Office 16 MAIN STREET		City EAST GREENWICH	State RI
4. Business Phone No. (401) 885-5600		5. State of Incorporation RHODE ISLAND	
6. SIC Code 5702			
7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL INSURANCE			

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Thomas J. DiSanto			Vice President Name Elaine J. DiSanto		
Street Address 16 Main Street			Street Address 16 Main Street		
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818
Secretary Name Melissa Elaine Brooks			Treasurer Name Elaine J. DiSanto		
Street Address 16 Main Street			Street Address 16 Main Street		
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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
600 NO PAR VALUE			100	Common	No Par Value

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



10039 DBC 01/11/05 03:42:54 PM

File Date 2/4/05

Check No. 3984

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 herein are true and correct.

Thomas J. DiSanto 1/25/05
Signature of Officer Date

Thomas J. DiSanto
Print or Type Name of Officer

President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 10039		2. Name of Corporation The Thomas Insurance Agency, Inc.			
3. Street Address Principal Business Office 16 MAIN STREET			City EAST GREENWICH	State RI	Zip 02818
4. Business Phone No. 4018855600		5. State of Incorporation RHODE ISLAND			6. SIC Code 0
7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL INSURANCE					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Thomas J. DiSanto		Vice President Name Elaine J. DiSanto			
Street Address 16 Main Street		Street Address 16 Main Street			
City East Greenwich	State Rhode Island	Zip 02818	City East Greenwich	State Rhode Island	Zip 02818
Secretary Name Melissa Elaine Brooks		Treasurer Name Elaine J. DiSanto			
Street Address 16 Main Street		Street Address 16 Main Street			
City East Greenwich	State Rhode Island	Zip 02818	City East Greenwich	State Rhode Island	Zip 02818
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name none		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
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
600	NO PAR VALUE		100	common	no par value

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



1 0 0 3 9

10039 DBC 03/17/04 11:20:59 AM

File Date **FILED**

Check No. **MAR 29 2004**

By: *[Signature]*

FOR SECRETARY OF STATE USE ONLY

C25886

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.

Thomas J. DiSanto 3-19-04
Signature of Officer Date
Thomas J. DiSanto
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. *10039* 2. Name of Corporation The Thomas Insurance Agency, Inc.

3. Street Address Principal Business Office 16 MAIN STREET City EAST GREENWICH State RI Zip 02818

4. Business Phone No. (401) 885-5600 5. State of Incorporation RHODE ISLAND 6. SIC Code 0

7. Brief Description of the Character of Business Conducted in Rhode Island
GENERAL INSURANCE BUSINESS AND ANY OTHER LEGAL BUSINESS.

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Thomas J. DiSanto	Vice President Name Elaine J. DiSanto
Street Address Same as above	Street Address Same as above
City State Zip	City State Zip
Secretary Name Melissa Elaine Brooks	Treasurer Name Elaine J. DiSanto
Street Address Same as above	Street Address Same as above
City State Zip	City State Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name None	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

Number of Shares	Class/Series	Par Value
600	NO	PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

Number of Shares	Class/Series	Par Value
100	common	no par value

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



10039 DBC1/17/0311:41:52 AM

File Date 4-24-03

Check No 2112

By KML

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.

Thomas J. DiSanto 3/06/2003
Signature of Officer Date

Thomas J. DiSanto
Print or Type Name of Officer

President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 10039
2. Name of Corporation The Thomas Insurance Agency, Inc.
3. Street Address Principal Business Office 16 Main Street
City East Greenwich State RI Zip 02818
4. Business Phone No. 885-5600
5. State of Incorporation Rhode Island
6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island
General insurance business and any legal business.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Thomas J. DiSanto	Vice President Name Elaine J. DiSanto
Street Address 16 Main Street	Street Address Same
City State Zip	City State Zip

Secretary Name Melissa Elaine Brooks	Treasurer Name Elaine J. DiSanto
Street Address Same	Street Address Same
City State Zip	City State Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name None	Director Name
Street Address	Street Address
City State Zip	City State Zip

Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
600	No Par Value	

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
Number of Shares		
100	Common	No Par Value

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

File Date: **FILED**
Check No.: **APR 11 2002**
By: **BY 1760**
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.

Thomas J. DiSanto 3/25/02
Signature of Officer Date
Thomas J. DiSanto
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **10039** 2. Name of Corporation **The Thomas Insurance Agency, Inc.**
3. Street Address Principal Business Office **16 Main Street** City **East Greenwich** State **RI** Zip **02818**
4. Business Phone No. **885-5600** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **6**
7. Brief Description of the Character of Business Conducted in Rhode Island
General insurance business and any legal business.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Thomas J. Di Santo	Vice President Name Elaine Di Santo
Street Address 16 Main Street	Street Address 16 Main Street
City State Zip East Greenwich RI 02818	City State Zip East Greenwich RI 02818
Secretary Name Melissa Elaine Brooks	Treasurer Name Elaine Di Santo
Street Address 16 Main Street	Street Address 16 Main Street
City State Zip East Greenwich RI 02818	City State Zip East Greenwich RI 02818

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name None	Director Name
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
600 NO PAR VAL		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
100	Common	No Par Value

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



* 1 0 0 3 9 *

File Date:
Check No.: FEB 15 2001
By: By [Signature] 1337
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.

[Signature] 1/10/01
Signature of Officer Date
Thomas J. Di Santo
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **10039** 2. Name of Corporation **The Thomas Insurance Agency, Inc.**
3. Street Address Principal Business Office **16 Main Street** City **East Greenwich** State **RI** Zip **02818**
4. Business Phone No. **885-5600** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island
General insurance business and any legal business.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Thomas P. DiSanto	Vice President Name Thomas P. DiSanto
Street Address 73 Cindy Ann Drive	Street Address 73 Cindy Ann Drive
City State Zip East Greenwich RI 02818	City State Zip East Greenwich RI 02818
Secretary Name Thomas P. DiSanto	Treasurer Name Thomas P. DiSanto
Street Address 73 Cindy Ann Drive	Street Address 73 Cindy Ann Drive
City State Zip East Greenwich RI 02818	City State Zip East Greenwich RI 02818

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Thomas P. DiSanto	Director Name
Street Address 73 Cindy Ann Drive	Street Address
City State Zip East Greenwich RI 02818	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
600 NO PAR VAL		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
100	Common	No Par Value

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



* 1 0 0 3 9 *

FILED

File Date: **FEB 07 2000**

Check No.: **065584**

By: **0571.056**

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.

Thomas P. DiSanto 1/26/00
Signature of Officer Date

Thomas P. DiSanto

Print or Type Name of Officer

President

Title of Officer

The Thomas Insurance Agency, Inc.

Vice President Anthony DiSanto
73 Cindy Ann Drive
East Greenwich, RI 02818

Vice President Melissa DiSanto
73 Cindy Ann Drive
East Greenwich, RI 02818

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 10039		2. Name of Corporation The Thomas Insurance Agency, Inc.	
3. Street Address Principal Business Office 16 Main Street		City East Greenwich	State RI
4. Business Phone No. 885-5600		Zip 02818	6. SIC Code 0000
5. State of Incorporation RHODE ISLAND			
7. Brief Description of the Character of Business Conducted in Rhode Island General insurance business and any legal business.			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) XX FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Thomas P. DiSanto		Vice President Name Thomas J. DiSanto	
Street Address 73 Cindy Ann Drive		Street Address 73 Cindy Ann Drive	
City East Greenwich	State RI	City East Greenwich	State RI
Zip 02818		Zip 02818	
Secretary Name Thomas P. DiSanto		Treasurer Name Thomas P. DiSanto	
Street Address 73 Cindy Ann Drive		Street Address 73 Cindy Ann Drive	
City East Greenwich	State RI	City East Greenwich	State RI
Zip 02818		Zip 02818	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Thomas P. DiSanto		Director Name	
Street Address 73 Cindy Ann Drive		Street Address	
City East Greenwich	State RI	City	State
Zip 02818		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares 600 NO PAR VAL	Class/Series	Number of Shares 100	Class/Series Common
Par Value		Par Value No Par Value	

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



File Date: **FILED**

Check No.: **MAR 17 1999**

By: **[Signature]**
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.

[Signature] 3/08/99
Signature of Officer
Thomas P. DiSanto
Print or Type Name of Officer
President
Title of Officer

The Thomas Insurance Agency, Inc.

Vice President

Anthony DiSanto

73 Cindy Ann Drive

East Greenwich, RI 02818

Vice President

Melissa DiSanto

73 Cindy Ann Drive

East Greenwich, RI 02818



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **10039** 2. Name of Corporation **The Thomas Insurance Agency, Inc.**
3. Street Address Principal Business Office **16 Main Street** City **East Greenwich** State **RI** Zip **02818**
4. Business Phone No. **885-5600** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island
General insurance business and any legal business.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)
President Name **Thomas P. DiSanto** Vice President Name **Thomas J. DiSanto**
Street Address **73 Cindy Ann Drive** Street Address **73 Cindy Ann Drive**
City **East Greenwich** State **RI** Zip **02818** City **East Greenwich** State **RI** Zip **02818**
Secretary Name **Thomas P. DiSanto** Treasurer Name **Thomas P. DiSanto**
Street Address **73 Cindy Ann Drive** Street Address **73 Cindy Ann Drive**
City **East Greenwich** State **RI** Zip **02818** City **East Greenwich** State **RI** Zip **02818**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)
Director Name **Thomas P. DiSanto** Director Name
Street Address **73 Cindy Ann Drive** Street Address
City **East Greenwich** State **RI** Zip **02818** City State Zip
Director Name
Street Address
City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 NO PAR VAL			100	Common	No Par Value

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



File Date: 3/31/98
Check No.: 4888
By: [Signature]
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.
[Signature] 1/27/98
Signature of Officer Date
Thomas P. DiSanto
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **10039** 2. Name of Corporation **The Thomas Insurance Agency, Inc.**
3. Street Address Principal Business Office **16 Main Street** City **East Greenwich** State **RI** Zip **02818**
4. Business Phone No. **885-5600** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8888**

7. Brief Description of the Character of Business Conducted in Rhode Island
General insurance business and any legal business.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **X**

President Name Thomas P. DiSanto Street Address 73 Cindy Ann Drive City State Zip East Greenwich RI 02818	Vice President Name Thomas J. DiSanto Street Address 73 Cindy Ann Drive City State Zip East Greenwich RI 02818
Secretary Name Thomas P. DiSanto Street Address 73 Cindy Ann Drive City State Zip East Greenwich RI 02818	Treasurer Name Thomas P. DiSanto Street Address 73 Cindy Ann Drive City State Zip East Greenwich RI 02818

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name Thomas P. DiSanto Street Address 73 Cindy Ann Drive City State Zip East Greenwich RI 02818	Director Name Street Address City State Zip
Director Name Street Address City State Zip 	Director Name Street Address City State Zip

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600	NO PAR VAL		100	Common	No Par Value

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



File Date: 2/21/97
Check No.: 1338
By: W

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.

Thomas P. DiSanto 1/31/97
Signature of Officer Date
Thomas P. DiSanto
Print or Type Name of Officer
President
Title of Officer

Corporate ID No.
10039

The Thomas Insurance Agency, Inc.

16 Main Street

East Greenwich

RI

02818

885-5600

Rhode Island

SIC Code
8888

General insurance business and any legal business.

Vice President

Anthony DiSanto

73 Cindy Ann Drive

East Greenwich, RI 02818

Vice President

Melissa DiSanto

73 Cindy Ann Drive

East Greenwich, RI 02818

**PROFIT CORPORATION
ANNUAL REPORT**

1996



State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 10039 2. NAME OF CORPORATION The Thomas Insurance Agency, Inc.

3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 16 Main Street CITY East Greenwich STATE RI ZIP CODE 02818

4. BUSINESS PHONE NO. 885-5600 5. STATE OF INCORPORATION RHODE ISLAND 6. SIC CODE 8878

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
General insurance business and any legal business

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME Thomas P. DiSanto	VICE PRESIDENT NAME Thomas J. DiSanto, Anthony DiSanto Melissa DiSanto
STREET ADDRESS 73 Cindy Ann Drive	STREET ADDRESS 73 Cindy Ann Drive
CITY STATE ZIP CODE East Greenwich RI 02818	CITY STATE ZIP CODE East Greenwich RI 02818
SECRETARY NAME Thomas P. Di Santo	TREASURER NAME Thomas P. DiSanto
STREET ADDRESS 73 Cindy Ann Drive	STREET ADDRESS 73 Cindy Ann Drive
CITY STATE ZIP CODE East Greenwich RI 02818	CITY STATE ZIP CODE East Greenwich RI 02818

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME Thomas P. DiSanto	DIRECTOR NAME
STREET ADDRESS 73 Cindy Ann Drive	STREET ADDRESS
CITY STATE ZIP CODE East Greenwich RI 02818	CITY STATE ZIP CODE
DIRECTOR NAME	DIRECTOR NAME
STREET ADDRESS	STREET ADDRESS
CITY STATE ZIP CODE	CITY STATE ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
600	NO PAR VAL		100	Common	No Par Value

This report must be **SIGNED IN INK** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

Thomas P. DiSanto
Signature of Officer
Thomas P. DiSanto
Print or Type Name of Officer
President
Thomas P. DiSanto 2/23
Title of Officer Date

File Date:

7/31/96

Check No:

1058

By:

CP

For Secretary of State Use Only

State of Rhode Island and Providence Plantations



Office of The Secretary of State

100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00
Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0010039 Annual Report for the year: 1995

Name of Corporation: The Thomas Insurance Agency, Inc.

Business entity organized under the laws of the State of: R.I.
For foreign entity, address and telephone number of principal office:
N/A

Business Entity is (check one):
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()
Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
1340 Cranston Street
Cranston, RI 02920
Phone: (401) 944-3110

Brief statement of the character of business conducted in Rhode Island:
general insurance business and any legal business

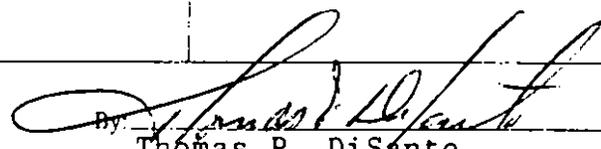
THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT	Thomas P. DiSanto	73 Cindy Ann Drive	East Greenwich, RI 02816
VICE PRESIDENT	Thomas P. DiSanto	Same as above	
SECRETARY	Thomas P. DiSanto	Same as above	
TREASURER	Thomas P. DiSanto	Same as above	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Thomas P. DiSanto	Same as above		

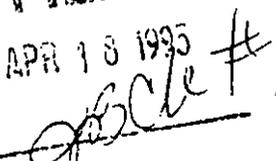
NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
600	Common	100	Common

Date 3/7 19 95 By 
 Thomas P. DiSanto
 PRINT OR TYPE NAME OF OFFICER SIGNING
 President
 TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

KATHLEEN G. DIMURO
1340 CRANSTON STREET
CRANSTON RI 02920

FILED
 APR 18 1995
 By  # 1075

Filing fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903 1335
401-277-3040

File Annually
I.L.C. Sept. 1 - Nov. 1
CORP. Jan. 1 - March 1

Corporate ID: 0010059 Annual Report for the year: 1994

Name of Business Entity: The Thomas Insurance Agency, Inc.

Business entity organized under the laws of the State of R.I.

Federal Taxpayer Identification Number: X

For foreign entity, address and telephone number of principal office:
N/A

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
1340 Cranston Street
Cranston, Rhode Island 02920

Phone: (401) 944-3110

Business Entity is (check one):

- Business Corporation (See RIGL Chapter 7-1.1)
- Professional Service Corporation (See RIGL Chapter 7-5.1)
- Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Thomas P. DiSanto, President
16 Main Street
East Greenwich, RI 02816

Brief statement of the character of business conducted in Rhode Island:
General insurance business and any legal business.

Date of Organization: April 19, 1976

Date of Qualification to do business in Rhode Island (if foreign entity):
N/A

THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One)	Thomas P. DiSanto, 73 Cindy Ann Drive,	E. Greenwich, RI	02816
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One)	Thomas P. DiSanto, Same as above		
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One)	Thomas P. DiSanto, Same as above		
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One)	Thomas P. DiSanto, Same as above		

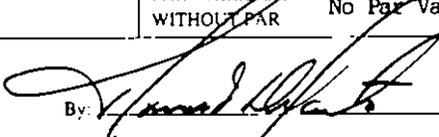
THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Thomas P. DiSanto,	Same as above		
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)
NUMBER 600
CLASS Common
SERIES
PAR VALUE OR WITHOUT PAR No Par Value

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 100
CLASS Common
SERIES
PAR VALUE OR WITHOUT PAR No Par Value

Date January 25, 19 94

By: 
Thomas P. DiSanto
PRINT OR TYPE NAME OF OFFICER SIGNING
President
TITLE OF OFFICER SIGNING

Form 31 194

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

GEORGE N. DIMURO, ESQ.
1340 CRANSTON STREET
CRANSTON RI 02920

FILED
MAR 18 1994
By 1191076
1191076

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0010039 Annual Report for the year 1993

FIRST: The name of the corporation is The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general insurance business and any legal business

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island
1340 Cranston Street, Cranston, RI 02920

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Thomas P. DiSanto	Director	73 Cindy Ann Drive, East Greenwich, RI
	Director	
	Director	
Thomas P. DiSanto	President	Same as above
Thomas P. DiSanto	Vice President	Same as above
Thomas P. DiSanto	Secretary	Same as above
Thomas P. DiSanto	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

Rec'd & Filed MAR 16 1993

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

*AMT#29
2191*

Dated February 17, 19 93

The Thomas Insurance Agency, Inc.
(Name of Corporation)

By Thomas P. DiSanto
Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0010039..... Annual Report for the year.....1992.....

FIRST: The name of the corporation is.....The Thomas Insurance Agency, Inc.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....general insurance business and any
legal business.....

FOURTH: If foreign corporation, address of its principal office.....
n/a.....

FIFTH: Business address in Rhode Island.....
1340 Cranston Street, Cranston, Rhode Island 02920.....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Thomas P. DiSanto	Director	73 Cindy Ann Drive, East Greenwich, RI
	Director	
	Director	
Thomas P. DiSanto	President	Same as above
Thomas P. DiSanto	Vice President	Same as above
Thomas P. DiSanto	Secretary	Same as above
Thomas P. DiSanto	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

EIGHTH: Number of Shares issued:

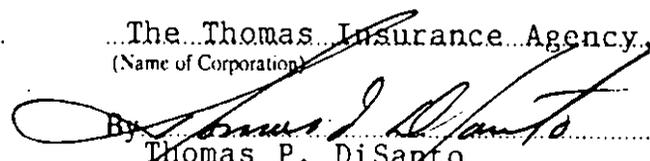
No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

RECEIVED
FEB 15 1992

AMT
1467

Dated.....February 14,..... 19 92..... The Thomas Insurance Agency, Inc.....

(Name of Corporation)

By 
Thomas P. DiSanto
Title President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

RJM

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0010039 Annual Report for the year 1991

FIRST: The name of the corporation is The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general insurance business and any legal business

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island 1340 Cranston Street, Cranston, Rhode Island 02920

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Thomas P. DiSanto	Director	73 Cindy Ann Drive, East Greenwich, RI
	Director	
	Director	
Thomas P. DiSanto	President	Same as above <i>SDP</i>
Anthony A. DiSanto	Vice President	89 Duncan Road, Warwick, RI 02886 <u>21 NANCE KAREN DRIVE, WARWICK, RI</u>
Thomas P. DiSanto	Secretary	73 Cindy Ann Drive, East Greenwich, RI
Thomas P. DiSanto	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common	Series 0 1991	No Par Value

PAID

SECY OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

Rec'd & Filed MAR 06 1991

Dated January 17, 19 91 The Thomas Insurance Agency, Inc.
(Name of Corporation)

By *Thomas P. DiSanto*
Title President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0010039 Annual Report for the year 1990

FIRST: The name of the corporation is The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general insurance business and any legal business

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island 1340 Cranston Street, Cranston, Rhode Island 02920

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Thomas P. DiSanto	Director	73 Cindy Ann Drive, East Greenwich, RI
	Director	
	Director	
Thomas P. DiSanto	President	73 Cindy Ann Drive, East Greenwich, RI
Anthony A. DiSanto	Vice President	89 Duncan Road, Warwick, RI
Thomas P. DiSanto	Secretary	73 Cindy Ann Drive, East Greenwich, RI
Thomas P. DiSanto	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

Rec'd & Filed
FEB 27 1990

Dated February 16, 1990

The Thomas Insurance Agency, Inc.
(Name of Corporation)
By Thomas P. DiSanto
Thomas P. DiSanto
Title President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

DV

Corporate ID 10039 Annual Report for the year 1989

FIRST: The name of the corporation is The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is general insurance business and any legal business

FOURTH: If foreign corporation, address of its principal office
n/a

FIFTH: Business address in Rhode Island
1340 Cranston Street, Cranston, Rhode Island 02920

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Thomas P. DiSanto	Director	73 Cindy Ann Drive, East Greenwich, RI
	Director	
	Director	
Thomas P. DiSanto	President	73 Cindy Ann Drive, East Greenwich, RI
Anthony A. DiSanto	Vice President	89 Duncan Road, Warwick, RI
Thomas P. DiSanto	Secretary	73 Cindy Ann Drive, East Greenwich, RI
Thomas P. DiSanto	Treasurer	73 Cindy Ann Drive, East Greenwich, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

EIGHTH: Number of Shares issued:

APR 17 1989

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

SECY OF STATE

Dated March 11 19 89

The Thomas Insurance Agency, Inc.
(Name of Corporation)

By Thomas P. DiSanto
Thomas P. DiSanto
Title President

(Report must be signed by an officer)

Filing Fee \$15.00

Under different name

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

D.P.

Corporate ID 10039 Annual Report for the year 1988

FIRST: The name of the corporation is The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General Insurance business and any legal purpose

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island 1340 Cranston Street, Cranston, Rhode Island 02920

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Thomas P. DiSanto	Director	73 Cindy Ann Drive, East Greenwich, RI
	Director	
	Director	
Thomas P. DiSanto	President	73 Cindy Ann Drive, East Greenwich, RI
Frank McGoff	vice President	130 Westwood Drive, East Greenwich, RI
Anthony A. DiSanto	Vice President	89 Duncan Road, Warwick, R.I.
Thomas P. DiSanto	Secretary	73 Cindy Ann Drive, East Greenwich, RI
Thomas P. DiSanto	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No par value

PAID

MAR 9 1988

SECY. OF STATE

Dated February 1 19 88

The Thomas Insurance Agency, Inc.
(Name of Corporation)
By *Thomas P. DiSanto*
THOMAS P. DI SANTO
Title President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 10039 Annual Report for the year 1987

FIRST: The name of the corporation is The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General Insurance business and
any legal purpose

FOURTH: If foreign corporation, address of its principal office
n/a

FIFTH: Business address in Rhode Island
1340 Cranston Street, Cranston, R.I. 02920

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Thomas P. DiSanto	Director	73 Cindy Ann Drive - East Greenwich, RI
	Director	
	Director	
Thomas P. DiSanto	President	73 Cindy Ann Drive - East Greenwich, RI
Frank McGoff	Vice President	130 Westwood Drive, East Greenwich, RI
Anthony A. DiSanto	Vice President	89 Duncan Road, Warwick, RI
Thomas P. DiSanto	Secretary	73 Cindy Ann Drive - East Greenwich, RI
Thomas P. DiSanto	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	VF	No Par Value

Rec'd. & Filed MAR 19 1987
Series VF

Dated February 16

The Thomas Insurance Agency, Inc.
(Name of Corporation)

By Thomas P. DiSanto

Title President

(Report must be signed by an officer)

AMRE 15.00
CBER 15.00
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State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 10039 Annual Report for the year 1986

FIRST: The name of the corporation is The Thomas Insurance Agency, Inc.

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THIRD: Character of business, briefly stated, is General insurance business and
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FOURTH: If foreign corporation, address of its principal office
n/a

FIFTH: Business address in Rhode Island
1340 Cranston Street, Cranston, RI 02920

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Thomas P. DiSanto	Director	73 Cindy Ann Drive-East Greenwich, RI
	Director	
	Director	
Thomas P. DiSanto	President	Same as above
Anthony A. DiSanto	Vice President	89 Duncan Road, Warwick, RI
Thomas P. DiSanto	Secretary	73 Cindy Ann Drive-East Greenwich, RI
Thomas P. DiSanto	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

RECORDED
FEB 22 1986
PAID
FEB 19 1986

Dated February 12, 19 86

The Thomas Insurance Agency, Inc.
(Name of Corporation)

By Thomas P. DiSanto
THOMAS P. DI SANTO
Title President

(Report must be signed by an officer)

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

10039

Annual Report for the year 1985

FIRST: The name of the corporation is
The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is
General Insurance business and any legal purpose

FOURTH: If foreign corporation, address of its principal office
n/a

FIFTH: Business address in Rhode Island
1340 Cranston Street, Cranston, RI 02920

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Thomas P. DiSanto	Director	8 David Drive, Johnston, RI
	Director	
	Director	
Thomas P. DiSanto	President	Same as above
Anthony A. DiSanto	Vice President	89 Duncan Road, Warwick, RI
Thomas P. DiSanto	Secretary	8 David Drive, Johnston
	Treasurer	

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

Dated: January 28 1985 The Thomas Insurance Agency, Inc.

LR

85 03/07/85 PAID 15.00

(Name of Corporation)

By THOMAS P. DI SANTO
Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is General insurance
business and any legal purpose

FOURTH: If foreign corporation, address of its principal office
n/a

FIFTH: Business address in Rhode Island
1340 Cranston Street-Cranston, R.I. 02920

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Thomas P. DiSanto	Director	8 David Drive-Johnston, R.I.
	Director	
	Director	
Thomas P. DiSanto	President	Same
Anthony A. DiSanto	Vice President	89 Duncan Road-Warwick, R.I.
Thomas P. DiSanto	Secretary	8 David Drive-Johnston, R.I.
Same	Treasurer	Same

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No par value

Dated: March 19 84

The Thomas Insurance Agency, Inc.

(Name of Corporation)

By *Thomas P. DiSanto*
THOMAS P. DISANTO
Title its President

(Report must be signed by an officer)

APR 11 1984
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If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1983

FIRST: The name of the corporation is
The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is General insurance
business and any legal purpose

FOURTH: If foreign corporation, address of its principal office
n/a

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) 1340 Cranston Street, Cranston, RI 02920

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Thomas P. DiSanto	Director	8 David Drive, Johnston, RI
	Director	
	Director	
Thomas P. DiSanto	President	Same
Anthony A. DiSanto	Vice President	89 Duncan Road, Warwick, RI
Thomas P. DiSanto	Secretary	8 David Drive, Johnston, RI
Same	Treasurer	Same

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

Dated: 3/5 1983

The Thomas Insurance Agency, Inc.
(Name of Corporation)

By *Thomas P. DiSanto*
THOMAS P. DI SANTO
Title its President

(Report must be signed by an officer)

MAR 31 1983

If the corporation has changed its registered office and/or its registered agent,
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1982

FIRST: The name of the corporation is
The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General insurance
business and any legal purpose

FOURTH: If foreign corporation, address of its principal office
N/A

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address)
1340 Cranston Street, Cranston, Rhode Island

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Thomas P. DiSanto	Director	8 David Drive, Johnston, RI
	Director	
	Director	
Thomas P. DiSanto	President	Same
Anthony A. DiSanto	Vice President	49 Duncan Road, Warwick, RI
Thomas P. DiSanto	Secretary	8 David Drive, Johnston, RI
Same	Treasurer	Same

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	Common		No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

Dated: 1/29 1982 The Thomas Insurance Agency, Inc.
(Name of Corporation)

By: *Thomas P. DiSanto*
THOMAS P. DI SANTO
Title: Its President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

1981 ANNUAL REPORT

OF

The Thomas Insurance Agency, Inc.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is
The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: The address of its registered office in Rhode Island is
1340 Cranston Street, Cranston, RI
and the name of its registered agent in Rhode Island at such address is
GEORGE N. DI MURO, ESQUIRE

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is
N/A

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is General insurance business and any legal purpose

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Thomas P. DiSanto	Director	8 David Drive, Johnston, RI
	Director	
Thomas P. DiSanto	President	Same
Same	Vice President	Same
Same	Secretary	Same
Same	Treasurer	Same

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
600	Common		No Par Value

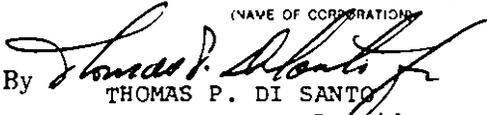
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.....09.....1500
1573A14.....150081

APR 22 1981
R

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100	Common		No Par Value

Dated 3/8, 1981.

The Thomas Insurance Agency, Inc.
(NAME OF CORPORATION)
By 
THOMAS P. DI SANTO
Its President

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

1980 ANNUAL REPORT OF

~~The Thomas Insurance Agency, Inc.~~

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is
~~The Thomas Insurance Agency, Inc.~~

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is
1340 Cranston Street, Cranston, Rhode Island
and the name of its registered agent in Rhode Island at such address is
GEORGE N. DI MURO, ESQ.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is
N/A

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is General insurance business and any legal purpose

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Thomas P. DiSanto	Director	8 David Drive, Johnston, RI
	Director	
Thomas P. DiSanto	President	Same
Same	Vice President	Same
Same	Secretary	Same
Same	Treasurer	Same

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
600	Common		No par value

APR 30 1980

SECRETARY OF STATE
STATE OF RHODE ISLAND
PROVIDENCE, RHODE ISLAND

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

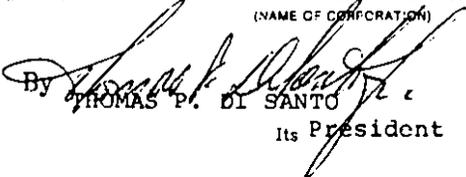
<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100	Common		No par value

Dated 4/16

, 1980

The Thomas Insurance Agency, Inc.

(NAME OF CORPORATION)

By 
THOMAS P. DI SANTO
Its President

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

1979 ANNUAL REPORT

OF

The Thomas Insurance Agency, Inc.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is
The Thomas Insurance Agency, Inc.

SECOND: It is incorporated under the laws of State of Rhode Island

THIRD: The address of its registered office in Rhode Island is
1340 Cranston Street, Cranston, Rhode Island
and the name of its registered agent in Rhode Island at such address is
GEORGE N. DI MURO, ESQ.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is
N/A

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is General Insurance Business and any legal purpose.

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Thomas P. Di Santo	Director	8 David Drive, Johnston, RI
	Director	
Thomas P. Di Santo	President	8 David Drive, Johnston, RI
Same	Vice President	Same
Same	Secretary	Same
Same	Treasurer	Same

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
600	Common	3	No par value

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100	Common		No par value

Dated February 23 , 19 79 The Thomas Insurance Agency, Inc.
(NAME OF CORPORATION)

By *Thomas P. Di Santo Jr.*
THOMAS P. DI SANTO
Its President

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

1978 ANNUAL REPORT

OF

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600	Common	3 1	No par value

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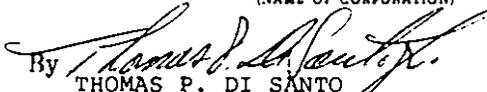
MAR 21 1979

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Dated February 23 , 1979 The Thomas Insurance Agency, Inc.

(NAME OF CORPORATION)

By 
THOMAS P. DI SANTO
Its President

Filing fee: \$15.00

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State of Rhode Island and Providence Plantations
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Number of Shares	Class	Series	Par Value per Share (Statement that Shares are without Par Value)
600	common		no par value

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FIGURE: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100	common		no par value

Dated Dec. 23

, 1977

The Thomas Insurance Agency, Inc.
(NAME OF CORPORATION)

By *Thomas P. DeLauter*
Its *President*