



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

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. 73161	2. Name of Corporation Jacques Brokerage Ltd.		
3. Street Address Principal Business Office 908 RESERVOIR AVENUE	City CRANSTON	State RI	Zip 02920
4. Business Phone No. 4019444470	5. State of Incorporation RHODE ISLAND	6. SIC Code 5702	
7. Brief Description of the Character of Business Conducted in Rhode Island TO ACT AS AN AGENT FOR INSURANCE COMPANIES			

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Elaine Jacques			Vice President Name		
Street Address 908 Reservoir Avenue			Street Address		
City Cranston	State RI	Zip 02920	City	State	Zip
Secretary Name Elaine Jacques			Treasurer Name Elaine Jacques		
Street Address 908 Reservoir Avenue			Street Address 908 Reservoir Avenue		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Elaine Jacques			Director Name		
Street Address 908 Reservoir Avenue			Street Address		
City Cranston	State RI	Zip 02920	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
4,000 COMM 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



7 3 1 6 1

73161 DBC 01/22/05 10:29:14 AM

File Date 2/2/05

Check No 4833

By JS

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 of Officer

Elaine Jacques

Print or Type Name of Officer

President

Title of Officer

Date

Form 630 12/01



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

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. 73161	2. Name of Corporation Jacques Brokerage Ltd.		
3. Street Address Principal Business Office 908 RESERVOIR AVENUE	City CRANSTON	State RI	Zip 02920
4. Business Phone No. 401 944-4470	5. State of Incorporation RHODE ISLAND	6. SIC Code 5702	

7. Brief Description of the Character of Business Conducted in Rhode Island
TO ACT AS AN AGENT FOR INSURANCE COMPANIES

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

President Name Elaine Jacques	Vice President Name
Street Address 908 Reservoir Avenue	Street Address
City Cranston	City
State RI	State
Zip 02920	Zip
Secretary Name Elaine Jacques	Treasurer Name Elaine Jacques
Street Address 908 Reservoir Avenue	Street Address 908 Reservoir Avenue
City Cranston	City Cranston
State RI	State RI
Zip 02920	Zip 02920

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

Director Name Elaine Jacques	Director Name
Street Address 908 Reservoir Avenue	Street Address
City Cranston	City
State RI	State
Zip 02920	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
4,000 COMM NO PAR VALUE		

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

ISSUED SHARES		
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



7 3 1 6 1

73161 DBC 06/23/04 10:55:04 AM

File Date 6/30/04

Check No. 4634 m36267

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.

Signature of Officer
Elaine Jacques

Date
6-29-04

Print or Type Name of Officer
President

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

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. *73161*		2. Name of Corporation Jacques Brokerage Ltd.			
3. Street Address Principal Business Office 908 RESERVOIR AVENUE			City CRANSTON	State RI	Zip 02920
4. Business Phone No. 4019444470		5. State of Incorporation RHODE ISLAND			6. SIC Code 5702
7. Brief Description of the Character of Business Conducted in Rhode Island TO ACT AS AN AGENT FOR INSURANCE COMPANIES					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Elaine Jacques			Vice President Name .		
Street Address 908 Reservoir Avenue			Street Address .		
City Cranston	State RI	Zip 02920	City .	State .	Zip .
Secretary Name Elaine Jacques			Treasurer Name Elaine Jacques		
Street Address 908 Reservoir Avenue			Street Address 908 Reservoir Avenue		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Elaine Jacques			Director Name .		
Street Address 908 Reservoir Avenue			Street Address .		
City Cranston	State RI	Zip 02920	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
4,000 COMM 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



* 7 3 1 6 1 *

**73161* 11/5/023:52:31 PM*

File Date 2/12/03

Check No. 4139

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] 2-11-03
Signature of Officer Date
Elaine Jacques
Print or Type Name of Officer
President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Innan, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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.

73161

2. Name of Corporation

Jacques Brokerage Ltd.

3. Street Address Principal Business Office

908 Reservoir Avenue

City

Cranston

State

RI

Zip

02910

4. Business Phone No.

(401) 944-4470

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5702

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

Insurance brokerage agency

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

President Name

Elaine Jacques

Vice President Name

Street Address

908 Reservoir Avenue

Street Address

City

Cranston

State

RI

Zip

02920

City

State

Zip

Secretary Name

Elaine Jacques

Treasurer Name

Elaine Jacques

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

Elaine Jacques

Director Name

Street Address

Same as above

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

Number of Shares

Class/Series

Par Value

4,000 COMM NO PAR VALUE

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

ISSUED SHARES

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



* 7 3 1 6 1 *

FILED

File Date: _____

Check No.: _____

FEB 15 2002

By: _____

By 3710915

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 of Officer Elaine Jacques Date 2-14-02

Print or Type Name of Officer Elaine Jacques

Title of Officer President

Form 630 12/01



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. **73161** 2. Name of Corporation **Jacques Brokerage Ltd.**

3. Street Address Principal Business Office

908 Reservoir Avenue

4. Business Phone No.

(401) 944-4470

5. State of Incorporation
RHODE ISLAND

City

Cranston

State

RI

Zip

02910
6. SIC Code
5702

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

Insurance brokerage agency

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

President Name

Elaine Jacques

Street Address

908 Reservoir Avenue

City

Cranston

Secretary Name

Elaine Jacques

Street Address

Same as above

City

State

RI

Zip

02920

Vice President Name

Street Address

City

State

Zip

Treasurer Name

Elaine Jacques

Street Address

Same as above

City

State

Zip

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

Director Name

Elaine Jacques

Street Address

Same as above

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

4,000 COMM NO PAR VALUE

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

ISSUED SHARES

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



* 7 3 1 6 1 *

File Date: 7/18/2001

Check No.: 3574

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 of Officer

Elaine Jacques

Print or Type Name of Officer

President

Title of Officer

Date

7-11-01



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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.

73161

2. Name of Corporation

Jacques Brokerage Ltd.

3. Street Address Principal Business Office

908 Reservoir Avenue

City

Cranston

State

RI

Zip

02910

4. Business Phone No.

(401) 944-4470

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5702

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

Insurance brokerage agency

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Elaine Jacques

Vice President Name

Street Address

908 Reservoir Avenue

Street Address

City

State

Zip

Cranston RI 02920

Secretary Name

Elaine Jacques

Treasurer Name

Elaine Jacques

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

Elaine Jacques

Director Name

Street Address

Same as above

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

Number of Shares

Class/Series

Par Value

4000 SHS COMMON NO PAR

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

ISSUED SHARES

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



* 7 3 1 6 1 *

File Date: _____

Check No.: _____

By: _____

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 of Officer _____ Date 5-10-00

Elaine Jacques

Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

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. 73161		2. Name of Corporation Jacques Brokerage Ltd.	
3. Street Address Principal Business Office 908 Reservoir Avenue		City Cranston	State RI
4. Business Phone No. (401) 944-4470		5. State of Incorporation RHODE ISLAND	6. SIC Code 5702
7. Brief Description of the Character of Business Conducted in Rhode Island Insurance brokerage agency.			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Elaine Jacques		Vice President Name	
Street Address 908 Reservoir Avenue		Street Address	
City Cranston	State RI	City	State
Zip 02920		Zip	
Secretary Name Elaine Jacques		Treasurer Name Elaine Jacques	
Street Address Same as above		Street Address Same as above	
City	State	City	State
Zip 02920		Zip	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Elaine Jacques		Director Name	
Street Address Same as above		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
4000 SHS COMMON NO PAR		100	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



FILED

File Date: **MAR 03 1999**
Check No.: **CC 2610**
By: _____
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 of Officer: **Elaine Jacques** Date: **2-28-99**
Print or Type Name of Officer: **Elaine Jacques**
Title of Officer: **President**



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



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. 73161		2. Name of Corporation Jacques Brokerage Ltd.	
3. Street Address Principal Business Office 908 Reservoir Avenue		City Cranston	State RI
		Zip 02920	
4. Business Phone No. (401) 944-4470		5. State of Incorporation RHODE ISLAND	
6. SIC Code 5702			
7. Brief Description of the Character of Business Conducted in Rhode Island Insurance brokerage agency.			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)			
President Name Elaine Jacques		Vice President Name	
Street Address 908 Reservoir Avenue		Street Address	
City Cranston	State RI	City	State
Zip 02920		Zip	
Secretary Name Elaine Jacques		Treasurer Name Elaine Jacques	
Street Address 908 Reservoir Avenue		Street Address 908 Reservoir Avenue	
City Cranston	State RI	City Cranston	State RI
Zip 02920		Zip 02920	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)			
Director Name Elaine Jacques		Director Name	
Street Address 908 Reservoir Avenue		Street Address	
City Cranston	State RI	City	State
Zip 02920		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	Class/Series	Number of Shares	Class/Series
4000 SHS COMMON NO PAR		100	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



* 7 3 1 6 1 *

File Date: **5/28/98**

Check No.: **2246**

By: **JB**

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.

Elaine Jacques **5-24-98**
Signature of Officer Date

Elaine Jacques
Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



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. **73161** 2. Name of Corporation **Jacques Brokerage Ltd.**

3. Street Address Principal Business Office **908 Reservoir Avenue** City **Cranston** State **RI** Zip **02920**

4. Business Phone No. **(401) 944-4470** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5702**

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

Insurance brokerage agency.

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

President Name

Elaine Jacques

Vice President Name

None

Street Address

908 Reservoir Avenue

Street Address

City **Cranston** State **RI** Zip **02920**

City State Zip

Secretary Name

Elaine Jacques

Treasurer Name

Elaine Jacques

Street Address

908 Reservoir Avenue

Street Address

908 Reservoir Avenue

City **Cranston** State **RI** Zip **02920**

City **Cranston** State **RI** Zip **02920**

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

Director Name

Elaine Jacques

Director Name

Street Address

908 Reservoir Avenue

Street Address

City **Cranston** State **RI** Zip **02920**

City State Zip

Director Name

Director Name

Street Address

Street Address

City State Zip City State Zip

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

4000 SHS COMMON NO PAR

ISSUED SHARES

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



File Date: **3/11/97**

Check No.: **1738**

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.

Elaine Jacques **3-10-97**
Signature of Officer Date

Elaine Jacques
Print or Type Name of Officer

President
Title of Officer

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. 73161		2. NAME OF CORPORATION Name Changed to: Jacques Brokerage Ltd. E/k/a Codori Jacques Agency, Inc.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 908 Reservoir Avenue		CITY Cranston	STATE RI
4. BUSINESS PHONE NO. (401) 944-4470		5. STATE OF INCORPORATION RHODE ISLAND	6. SEC CODE 5702
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Insurance brokerage agency			
8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME Elaine Jacques		VICE PRESIDENT NAME	
STREET ADDRESS 908 Reservoir Avenue		STREET ADDRESS	
CITY Cranston	STATE RI	ZIP CODE 02920	
SECRETARY NAME Elaine Jacques		TREASURER NAME Elaine Jacques	
STREET ADDRESS 908 Reservoir Avenue		STREET ADDRESS 908 Reservoir Avenue	
CITY Cranston	STATE RI	ZIP CODE 02920	ZIP CODE 02920
9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME Elaine Jacques		DIRECTOR NAME	
STREET ADDRESS 908 Reservoir Avenue		STREET ADDRESS	
CITY Cranston	STATE RI	ZIP CODE 02920	
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	ZIP CODE	
10. SHARES AUTHORIZED AND ISSUED			
AUTHORIZED SHARES			ISSUED SHARES
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES
4000 SHS COMMON NO PAR			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.

File Date:

5/10/96

Check No:

1324

By:

cc

For Secretary of State Use Only

Signature of Officer

Elaine Jacques
Print or Type Name of Officer

President

Title of Officer

2/10/96
Date

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: 73161 Annual Report for the Year: 1995

Name of Corporation: CODORI-JACQUES AGENCY, INC.

Business entity organized under the
laws of the State of: Rhode Island

Business Entity is (check one):
☒ [X] Business Corporation (See RIGL
Chapter 7-1.1)

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

☐ [] Professional Service Corporation (See RIGL
Chapter 7-5.1)

Phone: ()

Brief statement of the character of business
conducted in Rhode Island:
Insurance brokerage agency.

Address and telephone of the principal
office of business entity in Rhode Island
(Provide street address - Not P.O. Box):
1011 Atwells Avenue
Providence, RI 02909

Phone: (401) 421-6550

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	Street Address	City/State	Zip Code
<u>Elaine Jacques</u>	<u>1011 Atwells Avenue.</u>	<u>Providence, RI</u>	<u>02909</u>
VICE PRESIDENT	Street Address	City/State	Zip Code
<u>Donald F. Codori</u>	<u>1011 Atwells Avenue.</u>	<u>Providence, RI</u>	<u>02909</u>
SECRETARY	Street Address	City/State	Zip Code
<u>Donald F. Codori</u>	<u>1011 Atwells Avenue.</u>	<u>Providence, RI</u>	<u>02909</u>
TREASURER	Street Address	City/State	Zip Code
<u>Elaine Jacques</u>	<u>1011 Atwells Avenue.</u>	<u>Providence, RI</u>	<u>02909</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	Street Address	City/State	Zip Code
<u>Elaine Jacques</u>	<u>1011 Atwells Avenue.</u>	<u>Providence, RI</u>	<u>02909</u>
NAME	Street Address	City/State	Zip Code
<u>Donald F. Codori</u>	<u>1011 Atwells Avenue.</u>	<u>Providence, RI</u>	<u>02909</u>
NAME	Street Address	City/State	Zip Code

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

NUMBER OF SHARES AUTHORIZED
(Rider may be attached)

NUMBER OF SHARES ISSUED AND OUTSTANDING
(Rider may be attached)

Number of Shares	Class/Series
<u>4,000</u>	<u>common/-----</u>

Number of Shares	Class/Series
<u>200</u>	<u>common/-----</u>

Date January 12, 19 95

By: Elaine Jacques

Elaine Jacques
Print or Type Name of Officer Signing

President
Title of Officer Signing

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

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

Susan Leach DeBlasio
One Park Row
Providence, RI 02903

FILED
JAN 31 1995
By X3046
8777

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
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 73161

Annual Report for the Year: 1994

Name of Business Entity: CODORI-JACQUES AGENCY, INC.

Business entity organized under the laws of the State of: Rhode Island

Business Entity is (check one):
☒ Business Corporation (See RIGL Chapter 7-1.1)

Federal Taxpayer Identification Number: 000000000

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

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

☐ Limited Liability Company (See RIGL 7-16)

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

Susan Leach DeBlasio
One Park Row
Providence, RI 02903

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
1011 Atwells Avenue
Providence, RI 02909

Brief statement of the character of business conducted in Rhode Island:
Insurance brokerage agency

Phone: 421-6550

Date of Organization: July 7, 1993

Date of Qualification to do business in Rhode Island (if foreign entity): -----

THE NAMES OF THE OFFICERS ARE:

<input type="checkbox"/> Chief Executive Officer or <input checked="" type="checkbox"/> President (Check One)	Street Address	City/State	Zip Code
<u>Elaine Jacques</u>	<u>1011 Atwells Avenue</u>	<u>Providence, RI</u>	<u>02909</u>
<input type="checkbox"/> Chief Operating Officer or <input checked="" type="checkbox"/> V. President (Check One)	Street Address	City/State	Zip Code
<u>Donald F. Codori</u>	<u>1011 Atwells Avenue</u>	<u>Providence, RI</u>	<u>02909</u>
<input type="checkbox"/> Custodian of Records or <input checked="" type="checkbox"/> Secretary (Check One)	Street Address	City/State	Zip Code
<u>Donald F. Codori</u>	<u>1011 Atwells Avenue</u>	<u>Providence, RI</u>	<u>02909</u>
<input type="checkbox"/> Chief Financial Officer or <input checked="" type="checkbox"/> Treasurer (Check One)	Street Address	City/State	Zip Code
<u>Elaine Jacques</u>	<u>1011 Atwells Avenue</u>	<u>Providence, RI</u>	<u>02909</u>

THE NAMES OF THE DIRECTORS ARE:

Name	Street Address	City/State	Zip Code
<u>Elaine Jacques</u>	<u>1011 Atwells Avenue</u>	<u>Providence, RI</u>	<u>02909</u>
Name	Street Address	City/State	Zip Code
<u>Donald F. Codori</u>	<u>1011 Atwells Avenue</u>	<u>Providence, RI</u>	<u>02909</u>
Name	Street Address	City/State	Zip Code

Name	Street Address	City/State	Zip Code
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NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER OF SHARES ISSUED AND OUTSTANDING

NUMBER: 4,000

NUMBER: 200

CLASS: common

CLASS: common

SERIES: -----

SERIES: -----

PAR VALUE OR
WITHOUT PAR: No par value

PAR VALUE OR
WITHOUT PAR: No par value

Date February 24

1994

By: Elaine Jacques, Pres.

Elaine Jacques
Print or Type Name of Officer Signing

President
Title of Officer Signing

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.