



**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. 120469  
 2. Name of Corporation STARKWEATHER & SHEPLEY INSURANCE CORP OF MA  
 3. Street Address Principal Business Office 60 CATAMORE BLVD  
 City EAST PROVIDENCE State RI Zip 02914-01226  
 4. Business Phone No. 401-435-3600  
 5. State of Incorporation MASSACHUSETTS  
 6. SIC Code 5702  
 7. Brief Description of the Character of Business Conducted in Rhode Island  
 INSURANCE

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

President Name  
Natale P Calamis  
Street Address  
180 Shadow Brook Drive  
City Warwick State RI Zip 02886

Vice President Name  
Barry A Rosen  
Street Address  
199 Cranberry Road  
City North Attleboro State MA Zip 02760

Secretary Name  
William P McGillivray  
Street Address  
309 Promenade Avenue  
City Warwick State RI Zip 02886

Treasurer Name  
William P McGillivray  
Street Address  
309 Promenade Avenue  
City Warwick State RI Zip 02886

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

Director Name  
Fred R Tripp  
Street Address  
58 New Meadow Road  
City Barrington State RI Zip 02806

Director Name  
William P McGillivray  
Street Address  
309 Promenade Avenue  
City Warwick State RI Zip 02886

Director Name  
Natale P Calamis  
Street Address  
180 Shadow Brook Drive  
City Warwick State RI Zip 02886

Director Name  
John G J Duval  
Street Address  
9 Wedgewood Drive  
City Middletown State RI Zip 02842

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

AUTHORIZED SHARES  

Number of Shares	Class/Series	Par Value
1,000	\$100.00 PAR VALUE	

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

ISSUED SHARES  

Number of Shares	Class/Series	Par Value
400	Common	\$100.
380	Preferred	\$100.

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



File Date 2-17-05  
 Check No. 001815  
 By: WPS  
 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.

William P McGillivray 2/15/05  
 Signature of Officer Date  
 William P. McGillivray  
 Print or Type Name of Officer  
 Treasurer  
 Title of Officer

Starkweather & Shepley Insurance Corp of MA  
60 Catamore Blvd  
East Providence, RI 02914-1226

RI Secretary of State Annual Report  
#120469  
Directors Attachment

Gary E Heaslip  
47 Lawrence Drive  
East Providence, RI 02914

Lawrence E Keefe, Jr  
1 Ocean Ridge Dr  
Westerly, RI 02891



**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. 120469  
 2. Name of Corporation STARKWEATHER & SHEPLEY INSURANCE CORP. OF MA  
 3. Street Address Principal Business Office 60 CATAMORE BOULEVARD  
 City EAST PROVIDENCE State RI Zip 02914 -  
 4. Business Phone No. 4014353600  
 5. State of Incorporation MASSACHUSETTS  
 6. SIC Code 5702  
 7. Brief Description of the Character of Business Conducted in Rhode Island  
 INSURANCE

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

President Name Fred R Tripp Street Address 58 New Meadow Road City State Zip Barrington RI 02806	Vice President Name Natale P Calamis Street Address 180 Shadow Brook Drive City State Zip Warwick RI 02886
Secretary Name Gary E Heaslip Street Address 34 Nichols Street City State Zip Rehoboth MA 02769	Treasurer Name William P McGillivray Street Address 309 Promenade Avenue City State Zip Warwick RI 02886

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

Director Name Fred R Tripp Street Address 58 New Meadow Road City State Zip Barrington RI 02806	Director Name William P McGillivray Street Address 309 Promenade Avenue City State Zip Warwick RI 02886
Director Name Natale P Calamis Street Address 180 Shadow Brook Drive City State Zip Warwick RI 02886	Director Name John G J Duval Street Address 9 Wedgewood Drive City State Zip Middletown RI 02842

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

AUTHORIZED SHARES	Class/Series	Par Value
1,000	\$100.00 PAR VALUE	

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

ISSUED SHARES	Class/Series	Par Value
480	Common	
380	Preferred	

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



1 2 0 4 6 9

**FILED**  
 \*120469 FBC 02/13/04 11:24:10 AM\*  
 File Date FEB 23 2004  
 Check No. \_\_\_\_\_  
 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] 2/19/04  
 Signature of Officer Date  
 William P. McGillivray, CPA  
 Print or Type Name of Officer  
 Treasurer  
 Title of Officer

Starkweather & Shepley Insurance Corp of MA  
60 Catamore Blvd  
East Providence, RI 02914-1226

RI Secretary of State Annual Report  
#120469

Directors Attachment

Gary E Heaslip  
34 Nichols St  
Rehoboth, MA 02769

Lawrence E Keefe, Jr  
1 Ocean Ridge Dr  
Westerly, RI 02891



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 2003**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. *120469*		2. Name of Corporation STARKWEATHER & SHEPLEY INSURANCE CORP. OF MA			
3. Street Address Principal Business Office 60 CATAMORE BLVD			City EAST PROVIDENCE	State RI	Zip 02914-
4. Business Phone No. 4014353600		5. State of Incorporation MASSACHUSETTS			6. SIC Code 5702
7. Brief Description of the Character of Business Conducted in Rhode Island INSURANCE					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Fred R Tripp		Vice President Name Natale P Calamis			
Street Address 58 New Meadow Road		Street Address 180 Shadow Brook Drive			
City Barrington	State RI	Zip 02806	City Warwick	State RI	Zip 02886
Secretary Name Gaary E Heaslip		Treasurer Name William P McGillivray			
Street Address 34 Nichols Street		Street Address 309 Promenade Avenue			
City Rehoboth	State MA	Zip 02769	City Warwick	State MA	Zip 02886
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Fred R Tripp		Director Name William P McGillivray			
Street Address 58 New Meadow Road		Street Address 309 Promenade Avenue			
City Barrington	State RI	Zip 02806	City Warwick	State RI	Zip 02886
Director Name Natale P Calamis		Director Name John G J Duval			
Street Address 180 Shadow Brook Drive		Street Address 9 Wedgewood Drive			
City Warwick	State RI	Zip 02886	City Middletown	State RI	Zip 02842
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
1,000	\$100.00 PAR VALUE		400	Common	
			380	Preferred	

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



\*\*120469\* 2/19/03 2:02:08 PM\*

File Date 2-26-03

Check No. 03104

By: W.P.

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.

William P McGillivray 2-25-03

Signature of Officer Date

William P McGillivray, CRA

Print or Type Name of Officer

Treasurer

Title of Officer

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Starkweather & Shepley Insurance Corp of MA  
60 Catamore Blvd  
East Providence, RI 02914-1226

RI Secretary of State Annual Report  
#120469

Directors Attachment

Gary E Heaslip  
34 Nichols St  
Rehoboth, MA 02769

Lawrence E Keefe, Jr  
1 Ocean Ridge Dr  
Westerly, RI 02891

Medway Insurance Corporation  
60 Catamore Blvd  
East Providence, RI 02914-1226

RI Secretary of State Annual Report  
#9507

Directors Attachment

Gary E Heaslip  
34 Nichols St  
Rehoboth, MA 02769

Lawrence E Keefe, Jr  
1 Ocean Ridge Dr  
Westerly, RI 02891

Starkweather & Shepley Insurance Brokerage Incorporated  
60 Catamore Blvd  
East Providence, RI 02914-1226

RI Secretary of State Annual Report  
13952

Directors attachment

Gary E Heaslip  
34 Nichols St  
Rehoboth, MA 02769

Lawrence E Keefe, Jr  
1 Ocean Ridge Dr  
Westerly, RI 02891



**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. **120469** 2. Name of Corporation **STARKWEATHER & SHEPLEY INSURANCE CORP. OF MA**  
 3. Street Address Principal Business Office **60 Catamore Blvd.** City **East Providence** State **RI** Zip **02914**  
 4. Business Phone No. **401 435-3600** 5. State of Incorporation **MASSACHUSETTS** SIC Code **5702**  
 7. Brief Description of the Character of Business Conducted in Rhode Island

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

President Name <b>Fred R. Tripp</b>	Vice President Name <b>Natale P. Calamis</b>
Street Address <b>58 New Meadow Road</b>	Street Address <b>180 Shadow Brook Drive</b>
City State Zip <b>Barrington RI 02806</b>	City State Zip <b>Warwick RI 02886</b>
Secretary Name <b>Gary E. Heaslip</b>	Treasurer Name <b>William P. McGillivray</b>
Street Address <b>34 Nichols Street</b>	Street Address <b>309 Promenade Avenue</b>
City State Zip <b>Rehoboth MA 02769</b>	City State Zip <b>Warwick RI 02886</b>

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

Director Name <b>Fred R. Tripp</b>	Director Name <b>William P. McGillivray</b>
Street Address <b>58 New Meadow Road</b>	Street Address <b>309 Promenade Avenue</b>
City State Zip <b>Barrington RI 02806</b>	City State Zip <b>Warwick RI 02886</b>
Director Name <b>Natale P. Calamis</b>	Director Name <b>John G. J. Duval</b>
Street Address <b>180 Shadow Brook Drive</b>	Street Address <b>9 Wedgewood Drive</b>
City State Zip <b>Warwick RI 02886</b>	City State Zip <b>Middletown RI 02842</b>

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

AUTHORIZED SHARES  
 Number of Shares Class/Series Par Value  
**1,000 \$100.00 PAR VALUE**

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

ISSUED SHARES  
 Number of Shares Class/Series Par Value  
**400 Common**  
**380 Preferred**

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



\* 1 2 0 4 6 9 \*

File Date: 2-27-02  
 Check No.: 59198  
 By: [Signature]

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: [Signature] Date: 2-26-02  
 William P. McGillivray  
 Print or Type Name of Officer

Treasurer  
 Title of Officer

Starkweather & Shepley Insurance Corp of MA  
60 Catamore Blvd  
East Providence, RI 02914-1226

RI Secretary of State Annual Report  
#120469

Directors Attachment

Gary E Heaslip  
34 Nichols St  
Rehoboth, MA 02769

Lawrence E Keefe, Jr  
1 Ocean Ridge Dr  
Westerly, RI 02891