	State of Rhode Office of the Secret					
	Division Of Busines 148 W. River					
HOPE	Providence RI 029 (401) 222-30					
Foreign Business Annual Report Filing Period: January 3						
	G.L. 7-1.2-1501(e), each corporation fail ty (30) days after the time prescribed by enalty fee of \$25.00.					
ANNUAL REPORT YE	AR: <u>2020</u>					
1. Corporate ID No.	000120343					
2. Name of Corporation JOHN F. STAFFORD INSURANCE AGENCY, INC.						
3. Street Address Principal Business Office:						
No. and Street: City or Town:	1000 N MAIN STFALL RIVERState: MA	<u>A</u> Zip: <u>02720</u> Country: <u>USA</u>				
4. Business Phone N	о.					
<u>5086735893</u>						
5. State of Incorpora	tion					
State: <u>MA</u>						
	ARTICLE III					
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.						
<u>524210</u>						
6. Brief Description of	of the Character of Business Conduct	ed in Rhode Island				
INSURANCE AGE	INSURANCE AGENCY					
7. Names and Addres	sses of the Officers and Directors:					
All officers and di	rectors must be listed.					
Title	Individual Name	Address				
PRESIDENT	First, Middle, Last, Suffix JAMES H KAY	Address, City or Town, State, Zip Code, Country				
		7 MECHANIC STREET MATTTAPOISSETT, MA 02739- USA				

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CNP		\$0.0000	900.00	250
<b>Signed this 29 Day of Septen</b> or individuals signing this ins signatory, under penalties of p act and deed of the corporation electronic filing, in complianc	trument constitutes perjury, that this ins on, and that the fact	the affirmation or ac strument is that indiv ts stated herein are th	cknowledgement idual's act and d	of the eed or the
By <u>JAMES KAY</u> Signature of Authorized Rep	presentative of the Co	orporation		