



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 3946

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

| | | | |
|--|--------------|---|------------------|
| 1. Corporate ID No. 53090 | | 2. Name of Corporation COMPUTER INSURANCE COMPANY | |
| 3. Street Address (Principal Business Office) 10 WEYBOSSET ST, SUITE 502 | | City PROVIDENCE | State RI |
| 4. Business Phone No. 800-424-8526 | | 5. State of Incorporation RHODE ISLAND | 6. SIC Code 0 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island PROPERTY AND CASUALTY INSURANCE | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| President Name IRVING H. ROTHMAN | | Vice President Name PAUL C. BRISSON | |
| Street Address 10 WEYBOSSET ST. | | Street Address 10 WEYBOSSET ST. | |
| City PROVIDENCE | State RI | City PROVIDENCE | State RI |
| Zip 02903 | | Zip 02903 | |
| Secretary Name LOUIS B. FONTANA | | Treasurer Name THOMAS ADAMS | |
| Street Address 10 WEYBOSSET ST | | Street Address 10 WEYBOSSET ST | |
| City PROVIDENCE | State RI | City PROVIDENCE | State RI |
| Zip 02903 | | Zip 02903 | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| Director Name IRVING H. ROTHMAN | | Director Name THOMAS ADAMS | |
| Street Address 10 WEYBOSSETT ST | | Street Address 10 WEYBOSSETT ST | |
| City PROVIDENCE | State RI | City PROVIDENCE | State RI |
| Zip 02903 | | Zip 02903 | |
| Director Name G. DANIEL MCCARTHY | | Director Name | |
| Street Address 10 WEYBOSET ST | | Street Address | |
| City PROVIDENCE | State RI | City | State |
| Zip 02903 | | 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 | Number of Shares | Class/Series |
| 50,000 COMM \$100.00 PAR VALUE | | 25,000 | Common |
| | | | \$100.00 |

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



FILED

File Date
MAR 14 2005Check 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

PAUL C. BRISSON

Print or Type Name of Officer

VICE PRESIDENT

Title of Officer

Date

JANUARY 16, 2005

**COMPUTER INSURANCE COMPANY
10 WEYBOSSET ST., SUITE 502
PROVIDENCE, RI 02903-1818**

RHODE ISLAND CORPORATION ID #53090

**PROFIT CORPORATION ANNUAL REPORT
FOR THE YEAR 2005**

ITEM 8 - NAMES AND ADDRESSES OF THE OFFICERS (continued)

| | |
|-----------------------|---|
| Roy Bishop | Vice President 10 Weybosset St., Suite 502, Providence, RI 02903 |
| G. Daniel McCarthy | VP and General Counsel 10 Weybosset St., Suite 502, Providence, RI 02903 |
| Gerri Gold | Vice President 10 Weybosset St. Suite 502, Providence, RI 02903 |
| Desrie Mason-Jimerson | Assistant Secretary 10 Weybosset St. Suite 502, Providence, RI 02903 |
| Frank McGann | Assistant Secretary 10 Weybosset St., Suite 502, Providence, RI 02903 |
| James M. Cahillane | Assistant Secretary 10 Weybosset St. Suite 502, Providence, RI 02903 |



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 OR PRINTED IN BLACK)

| | | | |
|--|--------------|---|------------------|
| 1. Corporate ID No. 53090 | | 2. Name of Corporation COMPUTER INSURANCE COMPANY | |
| 3. Street Address Principal Business Office 10 WEYBOSSET ST. SUITE 502 | | City Providence | State RI |
| 4. Business Phone No. 800-424-8526 | | 5. State of Incorporation RHODE ISLAND | 6. SIC Code 0 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island PROPERTY AND CASUALTY INSURANCE | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| President Name IRVING H. ROTHMAN | | Vice President Name PAUL C. BRISSON | |
| Street Address SAME AS BOX #3 | | Street Address SAME AS BOX 3 | |
| City | State | City | State |
| Zip | | Zip | |
| Secretary Name LOUIS B. FONTANA JR. | | Treasurer Name THOMAS G. ADAMS | |
| Street Address SAME AS BOX 3 | | Street Address SAME AS BOX 3 | |
| City | State | City | State |
| Zip | | Zip | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| Director Name IRVING H. ROTHMAN | | Director Name G. DANIEL MCCARTHY | |
| Street Address SAME AS BOX 3 | | Street Address SAME AS BOX 3 | |
| City | State | City | State |
| Zip | | Zip | |
| Director Name THOMAS G. ADAMS | | Director Name | |
| Street Address SAME AS BOX 3 | | Street Address | |
| City | State | City | State |
| Zip | | 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 | Number of Shares | Class/Series |
| 50,000 COMM \$100.00 PAR VALUE | | 25,000 | Common |
| Par Value | | | \$100.00 |

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



* 5 3 0 9 0 *

| | |
|---------------------------------|---------|
| File Date | 1/14/04 |
| Check No. | 5549 |
| 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

PAUL C. BRISSON

Print or Type Name of Officer

VICE PRESIDENT

Title of Officer

COMPUTER INSURANCE COMPANY
10 WEYBOSSET ST. SUITE 502
PROVIDENCE, RI 02903

ITEMS 8 CONTINUED: NAMES AND ADDRESSES OF OFFICERS:

| | | |
|-----------------------|------------------------------------|------------------------|
| ROY BISHOP | VICE PRESIDENT | SAME ADDRESS AS BOX #3 |
| GERRI GOLD | VICE PRESIDENT | SAME ADDRESS AS BOX #3 |
| G. DANIEL MC-CARTHY | VICE PRESIDENT AND GENERAL COUNSEL | SAME ADDRESS AS BOX #3 |
| DESRIE MASON-JIMERSON | ASSISTANT SECRETARY | SAME ADDRESS AS BOX #3 |
| FRANK MC GANN | ASSISTANT SECRETARY | SAME ADDRESS AS BOX #3 |



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 OR PRINTED IN BLACK)

1. Corporate ID No.

53090

2. Name of Corporation

COMPUTER INSURANCE COMPANY

3. Street Address Principal Business Office

10 WEYBOSSET ST, SUITE 502

City

PROVIDENCE

State

RI

Zip

02903

4. Business Phone No.

800-424-8526

5. State of Incorporation

RHODE ISLAND

6. SIC Code

0

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

INLAND MARINE INSURANCE

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

President Name

IRVING H. ROTHMAN

Vice President Name

PAUL C. BRISSON

Street Address

Street Address

SAME AS PRINCIPAL OFFICE IN #3

SAME AS PRINCIPAL OFFICE IN #3

City

State

Zip

City

State

Zip

Secretary Name

LOUIS B. FONTANA JR.

Treasurer Name & CFO

THOMAS ADAMS

Street Address

Street Address

SAME AS PRINCIPAL OFFICE IN #3

SAME AS PRINCIPAL OFFICE IN #3

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

IRVING H. ROTHMAN

Director Name

Street Address

Street Address

SAME AS PRINCIPAL OFFICE IN #3

City

State

Zip

City

State

Zip

Director Name

G. DANIEL Mc CARTHY

Director Name

Street Address

Street Address

SAME AS PRINCIPAL OFFICE IN #3

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

50,000 COMM \$100.00 PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

25,000

Common

\$100.00

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



* 53090 *

File Date: 1-23-03

Check No.: 5198

By: LP

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

PAUL C. BRISSON

Print or Type Name of Officer

VICE PRESIDENT

Title of Officer

Date

1-13-2003

**COMPUTER INSURANCE COMPANY
10 WEYBOSSET ST., SUITE 502
PROVIDENCE, RI 02903-1818**

RHODE ISLAND CORPORATION ID #53090

**PROFIT CORPORATION ANNUAL REPORT
FOR THE YEAR 2003**

ITEM 8 - NAMES AND ADDRESSES OF THE OFFICERS (continued)

| | |
|--------------------|---|
| Edward W. Andrews | Vice President 10 Weybosset St., Suite 502, Providence, RI 02903 |
| G. Daniel McCarthy | VP and General Counsel 10 Weybosset St., Suite 502, Providence, RI.02903 |
| G. Stuart Souther | Assistant Secretary 10 Weybosset St. Suite 502, Providence, RI02903 |



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 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

53090

COMPUTER INSURANCE COMPANY

3. Street Address Principal Business Office

City

State

Zip

10 Weybosset St. Suite 502

Providence

RI

02903-1818

4. Business Phone No.

5. State of Incorporation

6. SIC Code

800-424-8526

RHODE ISLAND

0

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

Property Insurance-- primarily inland marine lines

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

President Name

Vice President Name

Irving H. Rothman

Paul C. Brisson

Street Address

Street Address

10 Weybosset St.

10 Weybosset St.

City

State

Zip

City

State

Zip

Providence

RI

02903

Providence

RI

02903

Secretary Name

Treasurer Name

Louis B. Fontana Jr.

Thomas Adams

Street Address

Street Address

10 Weybosset St.

10 Weybosset St.

City

State

Zip

City

State

Zip

Providence

RI

02903

Providence

RI

02903

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

Director Name

Director Name

Irving H. Rothman

G. Daniel McCarthy

Street Address

Street Address

10 Weybosset St.

10 Weybosset St.

City

State

Zip

City

State

Zip

Providence

RI

02903

Providence

RI

02903

Director Name

Director Name

Ben K. Wells

Street Address

Street Address

10 Weybosset St.

City

State

Zip

City

State

Zip

Providence

RI

02903

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

50,000 COMM \$100.00 PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

25,000

Common

\$100

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



* 5 3 0 9 0 *

File Date: 1-22-02

Check No.: 4781

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: [Signature] Date: January 10, 2002

Paul C. Brisson

Print or Type Name of Officer

Vice President

Title of Officer

COMPUTER INSURANCE COMPANY

2002 CORPORATION ANNUAL REPORT

8 CONTINUED

| | | | |
|--------------------|-----------------|------------------|----------------------|
| Ronald J. Lamb | VP | 10 Weybosset St. | Providence, RI 02903 |
| Edward Andrews | VP | 10 Weybosset St. | Providence, RI 02903 |
| G. Daniel McCarthy | VP | 10 Weybosset St. | Providence, RI 02903 |
| G. Stuart Souther | Asst. Secretary | 10 Weybosset St. | Providence, RI 02903 |

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. **53090** 2. Name of Corporation **COMPUTER INSURANCE COMPANY**

3. Street Address Principal Business Office

City

State

Zip

4. **10 WEYBOSSET ST., SUITE 502**

PROVIDENCE

RI

02903-2818

800-424-8526

5. State of Incorporation

RHODE ISLAND

6. SIC Code **0**

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

PROPERTY AND CASUALTY INSURANCE

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

President Name

Vice President Name

IRVING H. ROTHMAN

PAUL C. BRISSON

Street Address

Street Address

100 10 WEYBOSSET ST.

10 WEYBOSSET ST.

City

State

Zip

City

State

Zip

PROVIDENCE

RI

02903

PROVIDENCE

RI

02903

Secretary Name

Treasurer Name

LOUIS B. FONTANA

CFO

Street Address

Street Address

10 WEYBOSSET ST.

10 WEYBOSSET ST.

City

State

Zip

City

State

Zip

PROVIDENCE

RI

02903

PROVIDENCE

RI

02903

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

Director Name

Director Name

IRVING H. ROTHMAN

G. DANIEL MC CARTHY

Street Address

Street Address

10 WEYBOSSET ST.

10 WEYBOSSET ST.

City

State

Zip

City

State

Zip

PROVIDENCE

RI

02903

PROVIDENCE

RI

02903

Director Name

Director Name

BEN K. WELLS

Street Address

Street Address

10 WEYBOSSET ST.

City

State

Zip

City

State

Zip

PROVIDENCE

RI

02903

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

50,000 COMM \$100.00 PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

25,000

COMMON

\$100.00

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



* 5 3 0 9 0 *

FILED

File Date:

JAN 22 2001

Check No.:

By 004403

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

JANUARY 19, 2001
Date

PAUL C. BRISSON

Print or Type Name of Officer

VICE PRESIDENT

Title of Officer

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

CORPORATE ID # 53090
COMPUTER INSURANCE COMPANY
10 WEYBOSSET ST.
PROVIDENCE, RI 002903-2818

ITEM #8 – ADDITIONAL OFFICERS:

EDWARD ANDREWS, VICE PRESIDENT
RONALD J. LAMB, VICE PRESIDENT
G. DANIEL MC CARTHY, VICE PRESIDENT AND GENERAL COUNSEL
STUART SOUTHER, ASSISTANT SECRETARY



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.

2. Name of Corporation

53090

COMPUTER INSURANCE COMPANY

3. Street Address Principal Business Office

City

State

Zip

WARWICK

RI

02888-6406

4. Business Phone No.

5. State of Incorporation

6. SIC Code

800-424-8526

RHODE ISLAND

8888

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

PROPERTY AND CASUALTY AND IN LAND MARINE INSURANCE

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

President Name

IRVING H. ROTHMAN

Vice President Name

PAUL C. BRISSON

Street Address

100 BIGNALL ST.

Street Address

100 BIGNALL ST.

City

State

Zip

WARWICK

RI

02888-6406

City

State

Zip

WARWICK

RI

02888-6406

Secretary Name

G. DANIEL MC CARTHY

Treasurer Name

EDWARD W. ANDREWS

Street Address

100 BIGNALL ST.

Street Address

100 BIGNALL ST.

City

State

Zip

WARWICK

RI

0288806406

City

State

Zip

WARWICK

RI

02888-6406

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

Director Name

IRVING H. ROTHMAN

Director Name

G. DANIEL MC CARTHY

Street Address

100 BIGNALL ST.

Street Address

100 BIGNALL ST.

City

State

Zip

WARWICK

RI

02888-6406

City

State

Zip

WARWICK

RI

02888-6406

Director Name

BEN K. WELLS

Director Name

Street Address

Street Address

100 BIGNALL ST.

City

State

Zip

WARWICK

RI

02888-6406

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

50,000 COMM \$100.00 PAR

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

ISSUED SHARES

Number of Shares

Class/Series

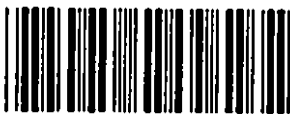
Par Value

25,000

COMMON

\$100.00

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



* 5 3 0 9 0 *

File Date: 1-14-00

Check No.: 4077

By: AMF

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.

JANUARY 13, 2000

Signature of Officer

Date

PAUL C. BRISSON, VICE PRESIDENT

Print or Type Name of Officer

Title of Officer

COMPUTER INSURANCE COMPANY
100 BIGNALL ST.
WARWICK, RI 02888-6406

RHODE ISLAND CORPORATE I.D. NUMBER: 53090

Profit Corporation Annual Report Filing

Line 8 – Additional Officer:

Ronald J. Lamb, Vice President
Computer Insurance Company
100 Bignall St.
Warwick, RI 02888-6406



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. 53090
2. Name of Corporation COMPUTER INSURANCE COMPANY
3. Street Address Principal Business Office 100 BIGNALL ST.
City WARWICK State RI Zip 02888
4. Business Phone No. 800-242-8526
5. State of Incorporation RHODE ISLAND
6. SIC Code 8888
7. Brief Description of the Character of Business Conducted in Rhode Island
PROPERTY AND CASUALTY INSURANCE

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

| | |
|--|---|
| President Name IRVING H. ROTHMAN Street Address 100 BIGNALL ST. City WARWICK State RI Zip 02888 Secretary Name G. DANIEL MC CARTHY Street Address 100 BIGNALL ST. City WARWICK State RI Zip 02888 | Vice President Name PAUL C. BRISSON Street Address 100 BIGNALL ST. City WARWICK State RI Zip 02888 Treasurer Name EDWARD W. ANDREWS Street Address 100 BIGNALL ST. City WARWICK State RI Zip 02888 |
|--|---|

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

| | |
|---|--|
| Director Name IRVING H. ROTHMAN Street Address 100 BIGNALL ST. City WARWICK State RI Zip 02888 Director Name BEN K. WELLS Street Address 100 BIGNALL ST. City WARWICK State RI Zip 02888 | Director Name G. DANIEL MC CARTHY Street Address 100 BIGNALL ST. City WARWICK State RI Zip 02888 |
|---|--|

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

| Number of Shares | Class/Series | Par Value |
|------------------|--------------|-----------|
| 50,000 | COMMON | \$100.00 |

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

| Number of Shares | Class/Series | Par Value |
|------------------|--------------|-----------|
| 25,000 | COMMON | \$100.00 |

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

File Date: Feb 12, 1999

Check No.: 3699

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: [Signature] Date: FEB. 9, 1999

RONALD J. LAMB
Print or Type Name of Officer

VICE PRESIDENT
Title of Officer

COMPUTER INSURANCE COMPANY
100 BIGNALL ST
WARWICK, RI 02888

PROFIT CORPORATION ANNUAL REPORT FOR 1999

LINE 8 – ADDITION OFFICERS

RONALD J. LAMB
100 BIGNALL ST
WARWICK, RI 02888



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. 53090
2. Name of Corporation Computer Insurance Company

3. Street Address Principal Business Office 5 Catamore Blvd.
City E. Providence State RI Zip 02914

4. Business Phone No. 800-424-8526
5. State of Incorporation Rhode Island
6. Code 8888

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

Property and Casualty Insurance business

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

President Name Ronald J. Lamb
Vice President Name Paul C. Brisson

Street Address 5 Catamore Blvd.
Street Address 5 Catamore Blvd.

City E. Providence State RI Zip 02914
City E. Providence State RI Zip 02914

Secretary Name Gail S. Mann
Treasurer Name Paul J. Milbury

Street Address 5 Catamore Blvd.
Street Address 5 Catamore Blvd.

City E. Providence State RI Zip 02914
City E. Providence State RI Zip 02914

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

Director Name Ronald J. Lamb
Director Name Paul C. Brisson

Street Address 5 Catamore Blvd.
Street Address 5 Catamore Blvd.

City E. Providence State RI Zip 02914
City E. Providence State RI Zip 02914

Director Name Gail S. Mann
Director Name Paul J. Milbury

Street Address 5 Catamore Blvd.
Street Address 5 Catamore Blvd.

City E. Providence State RI Zip 02914
City E. Providence State RI Zip 02914

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

AUTHORIZED SHARES

| Number of Shares | Class/Series | Par Value |
|------------------|--------------|-----------|
| 50,000 | Common | \$100.00 |

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

ISSUED SHARES

| Number of Shares | Class/Series | Par Value |
|------------------|--------------|-----------|
| 25,000 | Common | \$100.00 |

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

File Date: 7/21/98

Check No.: 2075-32

By: JMR

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

Paul C. Brisson

Print or Type Name of Officer

Vice President

Title of Officer

Date

7/20/98

COMPUTER INSURANCE COMPANY

CORPORATE ID # 53090

PROFIT CORPORATION-ANNUAL REPORT FOR THE YEAR **1998**

DIRECTORS: (CONTINUED FROM PAGE 1)

ROY W. GRAY
GLEN F. NUNEZ
PAUL J. MILBURY
TIMOTHY J. LEISMAN
THOMAS L. BEAUDOIN

OFFICERS: (CONTINUED FROM PAGE 1)

VICE PRESIDENT AND CONTROLLER
ASSISTANT SECRETARY
ASSISTANT SECRETARY
VP UNDERWRITING
VP CLAIMS

GLEN F. NUNEZ
MARGARET A. SHUKUR
PAUL C. BRISSON
ROY W. GRAY
JOSEPH BLAZEJEWSKI



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 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 53090
2. Name of Corporation Computer Insurance Company
3. Street Address Principal Business Office 5 Catamore Blvd. City E. Providence State RI Zip 02914
4. Business Phone No. 800-424-8526 5. State of Incorporation Rhode Island 6. SIC Code 8888
7. Brief Description of the Character of Business Conducted in Rhode Island Property and Casualty Insurance business

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

| | |
|--|---|
| President Name Ronald J. Lamb Street Address 5 Catamore Blvd. City E. Providence State RI Zip 02914 Secretary Name Gail S. Mann Street Address 5 Catamore Blvd. City E. Providence State RI Zip 02914 | Vice President Name Paul C. Brisson Street Address 5 Catamore Blvd. City E. Providence State RI Zip 02914 Treasurer Name Paul J. Milbury Street Address 5 Catamore Blvd. City E. Providence State RI Zip 02914 |
|--|---|

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

| | |
|--|--|
| Director Name Ronald J. Lamb Street Address 5 Catamore Blvd. City E. Providence State RI Zip 02914 Director Name Gail S. Mann Street Address 5 Catamore Blvd. City E. Providence State RI Zip 02914 | Director Name Paul C. Brisson Street Address 5 Catamore Blvd. City E. Providence State RI Zip 02914 Director Name Ilene B. Jacobs Street Address 5 Catamore Blvd. City E. Providence State RI Zip 02914 |
|--|--|

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

AUTHORIZED SHARES

| Number of Shares | Class/Series | Par Value |
|------------------|--------------|-----------|
| 50,000 | Common | \$100.00 |

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

ISSUED SHARES

| Number of Shares | Class/Series | Par Value |
|------------------|--------------|-----------|
| 25,000 | Common | \$100.00 |

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

File Date: 7/21/98

Check No.: 207542

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

Date

Paul C. Brisson

Print or Type Name of Officer

Vice President

Title of Officer

COMPUTER INSURANCE COMPANY

CORPORATE ID # 53090

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1997**

DIRECTORS: (CONTINUED FROM PAGE 1)

ROY W. GRAY
BARRY M. GRIFFIN
GLEN F. NUNEZ
PAUL J. MILBURY
PAMELA S. TUCKER

OFFICERS: (CONTINUED FROM PAGE 1)

VICE PRESIDENT AND CONTROLLER
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
VP UNDERWRITING
VP CLAIMS

GLEN F. NUNEZ
MARGARET A. SHUKUR
BARRY M. GRIFFIN
PAUL C. BRISSON
ROY W. GRAY
JOSEPH BLAZEJEWSKI



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 1996

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 53090 2. Name of Corporation Computer Insurance Company
3. Street Address Principal Business Office 5 Catamore Blvd. City E. Providence State RI Zip 02914
4. Business Phone No. 800-424-8526 5. State of Incorporation Rhode Island 6. SIC Code 8888

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

Property and Casualty Insurance business

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

| | | | |
|----------------|------------------|---------------------|------------------|
| President Name | Ronald J. Lamb | Vice President Name | Paul C. Brisson |
| Street Address | 5 Catamore Blvd. | Street Address | 5 Catamore Blvd. |
| City | E. Providence | City | E. Providence |
| State | RI | State | RI |
| Zip | 02914 | Zip | 02914 |
| Secretary Name | Gail S. Mann | Treasurer Name | Paul J. Milbury |
| Street Address | 5 Catamore Blvd. | Street Address | 5 Catamore Blvd. |
| City | E. Providence | City | E. Providence |
| State | RI | State | RI |
| Zip | 02914 | Zip | 02914 |

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

| | | | |
|----------------|------------------|----------------|------------------|
| Director Name | Ronald J. Lamb | Director Name | Paul C. Brisson |
| Street Address | 5 Catamore Blvd. | Street Address | 5 Catamore Blvd. |
| City | E. Providence | City | E. Providence |
| State | RI | State | RI |
| Zip | 02914 | Zip | 02914 |
| Director Name | Gail S. Mann | Director Name | Ilen e B. Jacobs |
| Street Address | 5 Catamore Blvd. | Street Address | 5 Catamore Blvd. |
| City | E. Providence | City | E. Providence |
| State | RI | State | RI |
| Zip | 02914 | Zip | 02914 |

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

| Number of Shares | Class/Series | Par Value |
|------------------|--------------|-----------|
| 50,000 | Common | \$25.00 |

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

| Number of Shares | Class/Series | Par Value |
|------------------|--------------|-----------|
| 25,000 | Common | =\$100.00 |

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

File Date: 7/21/98

Check No.: 207542

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
Paul C. Brisson

Print or Type Name of Officer

Vice President

Title of Officer

Date: 1/20/98

COMPUTER INSURANCE COMPANY

CORPORATE ID # 53090

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1996**

DIRECTORS: (CONTINUED FROM PAGE 1)

ROY W. GRAY
BARRY M. GRIFFIN
GLEN F. NUNEZ
PAUL J. MILBURY
PAMELA S. TUCKER

OFFICERS: (CONTINUED FROM PAGE 1)

SENIOR VICE PRESIDENT FINANCE
AND CHIEF FINANCIAL OFFICER
VICE PRESIDENT AND CONTROLLER
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
VP UNDERWRITING
VP CLAIMS

ILENE B. JACORS
GLEN F. NUNEZ
MARGARET A. SHUKUR
BARRY M. GRIFFIN
PAUL C. BRISSON
ROY W. GRAY
JOSEPH BLAZEJEWSKI



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 1995

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

53090

Computer Insurance Company

3. Street Address Principal Business Office

City

State

Zip

5 Catamore Blvd.

E. Providence

RI

02914

4. Business Phone No.

5. State of Incorporation

6. SIC Code

800-424-8526

Rhode Island

8888

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

Property and Casualty Insurance business

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

President Name

Vice President Name

Ronald J. Lamb

Paul C. Brisson

Street Address

Street Address

5 Catamore Blvd.

5 Catamore Blvd.

City

State

Zip

City

State

Zip

E. Providence RI

02914

E. Providence RI

02914

Secretary Name

Treasurer Name

Gail S. Mann

Ilene B. Jacobs

Street Address

Street Address

5 Catamore Blvd.

5 Catamore Blvd.

City

State

Zip

City

State

Zip

E. Providence RI

02914

E. Providence RI

02914

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

Director Name

Director Name

Ronald J. Lamb

Paul C. Brisson

Street Address

Street Address

5 Catamore Blvd.

5 Catamore Blvd

City

State

Zip

City

State

Zip

E. Providence RI

02914

E. Providence RI

02914

Director Name

Director Name

Gail S. Mann

Ilene B. Jacobs

Street Address

Street Address

5 Catamore Blvd.

5 Catamore Blvd.

City

State

Zip

City

State

Zip

E. Providence RI

02914

E. Providence RI

02914

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

AUTHORIZED SHARES

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

50,000

Common

\$100.00

25,000

Common

\$100.00

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

File Date: 7/21/98

Check No.: 207542

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

Paul C. Brisson

Print or Type Name of Officer

Vice President

Title of Officer

COMPUTER INSURANCE COMPANY

CORPORATE ID # 53090

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1995**

DIRECTORS: (CONTINUED FROM PAGE 1)

ROY W. GRAY
BARRY M. GRIFFIN
GLEN F. NUNEZ
KEVIN T. SWEENEY
PAMELA S. TUCKER

OFFICERS: (CONTINUED FROM PAGE 1)

| | |
|--------------------------------|--------------------|
| VICE PRESIDENT AND CONTROLLER: | KEVIN T. SWEENEY |
| ASSISTANT SECRETARY | MARGARET A. SHUKUR |
| ASSISTANT SECRETARY | BRUCE P. SAULNIER |
| VP UNDERWRITING | ROY W. GRAY |
| VP CLAIMS | JOSEPH BLAZEJEWSKI |



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 1994
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 53090 2. Name of Corporation Computer Insurance Company
3. Street Address Principal Business Office 5 Catamore Blvd. City E. Providence State RI Zip 02914
4. Business Phone No. 800-424-8526 5. State of Incorporation Rhode Island 6. SIC Code 888*8

7. Brief Description of the Character of Business Conducted in Rhode Island
Property and Casualty Insurance business

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

| | |
|--|---|
| President Name <u>Ronald J. Lamb</u> Street Address <u>5 Catamore Blvd.</u> City <u>E. Providence</u> State <u>RI</u> Zip <u>02914</u> Secretary Name <u>Gail S. Mann</u> Street Address <u>5 Catamore Blvd.</u> City <u>E. Providence</u> State <u>RI</u> Zip <u>02914</u> | Vice President Name <u>Paul C. Brisson</u> Street Address <u>5 Catamore Blvd.</u> City <u>E. Providence</u> State <u>RI</u> Zip <u>02914</u> Treasurer Name <u>Ilene B. Jacobs</u> Street Address <u>5 Catamore Blvd.</u> City <u>E. Providence</u> State <u>RI</u> Zip <u>02914</u> |
|--|---|

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

| | |
|--|--|
| Director Name <u>Ronald J. Lamb</u> Street Address <u>5 Catamore Blvd.</u> City <u>E. Providence</u> State <u>RI</u> Zip <u>02914</u> Director Name <u>Gail S. Mann</u> Street Address <u>5 Catamore Blvd.</u> City <u>E. Providence</u> State <u>RI</u> Zip <u>02914</u> | Director Name <u>Paul C. Brisson</u> Street Address <u>5 Catamore Blvd.</u> City <u>E. Providence</u> State <u>RI</u> Zip <u>02914</u> Director Name <u>Ilene B. Jacobs</u> Street Address <u>5 Catamore Blvd.</u> City <u>E. Providence</u> State <u>RI</u> Zip <u>02914</u> |
|--|--|

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

AUTHORIZED SHARES

| Number of Shares | Class/Series | Par Value |
|------------------|---------------|-----------------|
| <u>50,000</u> | <u>Common</u> | <u>\$100.00</u> |

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

ISSUED SHARES

| Number of Shares | Class/Series | Par Value |
|------------------|---------------|-----------------|
| <u>25,000</u> | <u>Common</u> | <u>\$100.00</u> |

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

File Date: 5/1/98

Check No.: 207542

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 [Signature] Date 7/20/98

Paul C. Brisson

Print or Type Name of Officer

Vice President

Title of Officer

COMPUTER INSURANCE COMPANY
CORPORATE ID # 53090

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1994**

DIRECTORS: (CONTINUED FROM PAGE 1)

ROY W. GRAY
BARRY M. GRIFFIN
GLEN F. NUNEZ
KEVIN T. SWEENEY
PAMELA S. TUCKER

OFFICERS: (CONTINUED FROM PAGE 1)

| | |
|--------------------------------|--------------------|
| VICE PRESIDENT AND CONTROLLER: | KEVIN T. SWEENEY |
| ASSISTANT SECRETARY | MARGARET A. SHUKUR |
| ASSISTANT SECRETARY | THOMAS W. WRONSKI |
| VP UNDERWRITING | ROY W. GRAY |
| VP CLAIMS | PETER KEANE |

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 0053090

Annual Report for the year 1993

FIRST: The name of the corporation is COMPUTER INSURANCE COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Property and Casualty Insurance

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

FIFTH: Business address in Rhode Island 5 Catamore Boulevard
East Providence, RI 02914-1203

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

| Name | Office | Address (including number, street, zip code) |
|-----------------|----------------|--|
| Ronald J. Lamb | Director | 234 Foxhill Rd, Burlington, MA 01803 |
| Paul C. Brisson | Director | 51 Autumn Rd, Lunenburg, MA 01462 |
| Ilene B. Jacobs | Director | 213 Sandy Pond Rd, Lincoln, MA 01773 |
| Ronald J. Lamb | President | 234 Fox Hill Rd, Burlington, MA 01803 |
| Paul C. Brisson | Vice President | 51 Autumn Rd, Lunenburg, MA 01462 |
| Gail S. Mann | Secretary | 196 Payson Rd, Belmont, MA 02178 |
| Ilene B. Jacobs | Treasurer | 213 Sandy Pond Rd, Lincoln, MA 01773 |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | PAID | Series | Par Value or statement that shares are without par value |
|---------------|--------|-------------|--------|--|
| 50,000 | Common | FFR 19 1993 | None | \$100.00 |

SEC'Y OF STATE

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 25,000 | Common | None | \$100.00 |

Dated February 16, 1993

COMPUTER INSURANCE COMPANY
(Name of Corporation)

By 
Vice President

(Report must be signed by an officer)

Title

Computer Insurance Co, 5 Catamore Blvd., E. Providence, RI 02914
1992 Annual Report

SIXTH:

Continued

| | | |
|-------------------------|---------------------|--|
| Director and Officer | Kevin T. Sweeney, | 11 Olde Meeting House Rd. Westborough, MA 01581 |
| Director | Gail S. Mann, | 196 Payson Rd. Belmont, MA 02178 |
| Officer | Rebecca R. Hawkins, | 2 Hawthorne Place Boston, MA 02108 |

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

RECEIVED FEB 07 1992

Corporate ID 0053090 Annual Report for the year 1992

FIRST: The name of the corporation is COMPUTER INSURANCE COMPANY

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is PROPERTY AND LIABILITY INSURANCE

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

FIFTH: Business address in Rhode Island 5 CATAMORE BOULEVARD
EAST PROVIDENCE, RI 02914-1203

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

| Name | Office | Address (including number, street, zip code) |
|--------------------|----------------|--|
| Ronald J. Lamb | Director | 234 Foxhill Rd., Burlington, MA 01803 |
| Paul C. Brisson | Director | 51 Autumn Rd., Lunenburg, MA 01462 |
| Ilene B. Jacobs | Director | 213 Sandy Pond Rd., Lincoln, MA 01773 |
| Ronald J. Lamb | President | 234 Foxhill Rd., Burlington, MA 01803 |
| Paul C. Brisson | Vice President | 51 Autumn Rd., Lunenburg, MA 01462 |
| Marietta M. Ethier | Secretary | 18 Apple Ridge Dr., Natick, MA 01760 |
| Ilene B. Jacobs | Treasurer | 213 Sandy Pond Rd., Lincoln, MA 01773 |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 50,000 | Common | None | \$100.00 |

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 25,000 | Common | None | \$100.00 |

35 34 7576

RECEIVED FEB 07 1992

Dated February 6, 1992

COMPUTER INSURANCE COMPANY
(Name of Corporation)

By [Signature]
Title Vice President

(Report must be signed by an officer)

COMPUTER INSURANCE COMPANY
5 Catamore Boulevard
East Providence, RI 02914-1203

CORPORATE ID: 0053090

ANNUAL REPORT: FOR THE YEAR 1992

Sixth: Names and addresses of its directors and officers:

(Rider)

Kevin T. Sweeney, Director 11 Olde Meeting House Road
& Officer, Westborough, MA 01581

Marietta M. Ethier, Director, 18 Apple Ridge Drive
South Natick, MA 01760

Edward F. Juliano Jr, Officer, 87 Mossman Road
Sudbury, MA 01776

Dated: FEBRUARY 6, 1992

COMPUTER INSURANCE COMPANY

BY: 

TITLE: VICE PRESIDENT

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 0053090 Annual Report for the year 1991

FIRST: The name of the corporation is COMPUTER INSURANCE COMPANY

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Property & Casualty Insurance

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

FIFTH: Business address in Rhode Island 5 Catamore Boulevard
E. Providence, RI 02914-1203

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

| Name | Office | Address (including number, street, zip code) |
|-------------------------------|----------------|--|
| (Directors' Listing Attached) | | |
| | Director | |
| | Director | |
| | Director | |
| Ronald J. Lamb | President | 234 Foxhill Rd., Burlington, MA 01803 |
| Paul C. Brisson | Vice President | 51 Autumn Road, Lunenburg, MA 01462 |
| Marietta M. Ethier | Secretary | 18 Apple Ridge Dr., Natick, MA |
| Ilene B. Jacobs | Treasurer | 213 Sandy Pond Rd., Lincoln, MA |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 50,000 | Common | None | \$100.00 |

PAID

MAR 1 1991

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 25,000 | Common | None | \$100.00 |

SEVEN - 1991

Dated FEBRUAR 8, 1991 19 91

Computer Insurance Company
(Name of Corporation)

By Paul C. Brisson
Title Vice President-Operations

(Report must be signed by an officer)

Computer Insurance Company
5 Catamore Blvd.
E. Providence, RI 02914-1203

Annual Report 1991

Question 6 - continued

| Title | Names of Officers and Directors | Street Address | City and State |
|-------|------------------------------------|---------------------------|----------------|
| V | Kevin T. Sweeney | 11 Olde Meeting House Rd. | Westboro, MA |
| AS | Eric C. Thorp | 2 Patriot Lane | Westford, MA |

State of Rhode Island and Providence PlantationsCORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903Corporate ID 0053030 Annual Report for the year 1990FIRST: The name of the corporation is COMPUTER INSURANCE COMPANYSECOND: It is incorporated under the laws of Rhode IslandTHIRD: Character of business, briefly stated, is Property and Casualty InsuranceFOURTH: If foreign corporation, address of its principal office N/AFIFTH: Business address in Rhode Island 5 Catamore Boulevard
East Providence, RI 02914

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

| Name | Office | Address (including number, street, zip code) |
|--------------------|----------------|--|
| | Director | (Directors Listing Attached) |
| | Director | |
| | Director | |
| Ronald J. Lamb | President | 234 Fox Hill Rd., Burlington, MA 01803 |
| Paul C. Brisson | Vice President | 51 Autumn Rd., Lunenburg, MA 01462 |
| Marietta M. Ethier | Secretary | 18 Apple Ridge Dr., So. Natick, MA 01760 |
| Ilene B. Jacobs | Treasurer | 213 Sandy Pond Rd., Lincoln, MA 01773 |

SEVENTH: Number of Shares authorized:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 10,000 | Common | None | \$100.00 |

PAID

EIGHTH: Number of Shares issued:

| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|--------|--------|--|
| 10,000 | Common | None | \$100.00 |

Dated January 24, 1990

Computer Insurance Company
(Name of Corporation)By [Signature]

(Report must be signed by an officer)

Title Vice-President - Operations
Assistant Secretary

COMPUTER INSURANCE COMPANY

5 Catamore Boulevard
East Providence, RI 02914

CORPORATE ID: 53090

ANNUAL REPORT FOR THE YEAR: 1990

SIXTH: CONTINUED

DIRECTORS:

| | |
|--------------------|--|
| RONALD J. LAMB | 234 FOX HILL RD, BURLINGTON, MA 01803 |
| PAUL C. BRISSON | 51 AUTUMN RD, LUNENBURG, MA 01462 |
| ILENE B. JACOBS | 213 SANDY POND RD, LINCOLN, MA 01773 |
| JAMES M. OSTERHOFF | 308 CATERINA HTS, CONCORD, MA 01742 |
| MARIETTA M. ETHIER | 18 APPLE RIDGE DR, SO NATICK, MA 01760 |

OFFICERS: CONTINUED FROM PAGE 1

JAMES M. OSTERHOFF, VICE PRESIDENT - FINANCE,
308 CATERINA HTS, CONCORD, MA 01742

KEVIN T. SWEENEY, VICE PRESIDENT - CONTROLLER,
11 OLDE MEETING HOURSE RD, WESTBORO, MA 01581

ERIC C. THORP, ASSISTANT SECRETARY,
2 PATRIOT LANE, WESTFORD, MA 01886