James R. Langevin, Secretary o Corporations 13

100 North Main Street, Providence, RI 0290

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.

2. Name of Corporation

64193

G & L INSURANCE ASSOCIATES, INC.

3. Street Address Principal Business Office

State

Zip

4. Business Phone No.

S. State of Incorporation

6. SIC Code

RHODE ISLAND

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

6064

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

President Name

Vice President Name

Street Address

Street Address

City

State

Z.Ip

City

State

Zip

Secretary Name

Street Address

Street Address

City

State

City

State

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

Director Name

Director Name

Street Address

Street Address

City

State

Zio

City

State

State

Director Name

Director Name

Street Address

Street Address

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

210

James R. Langevin, Secretary of State

RETURN SERVICE REQUESTED



ROBB246* OZ RETURN TO SE ROBBIO'LOUIS PO BOX 3611 PO BOX 3611 CRANSTON AT 02910-0611

RETURN TO SENDER