

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. 36599	2. Name of Corporation J.J. Gilmartin & Son Agency, Inc.		
3. Street Address Principal Business Office 1293 POST ROAD	City WARWICK	State RI	Zip 02888
4. Business Phone No. 4017812100	5. State of Incorporation RHODE ISLAND		6. SIC Code 5702

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

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

President Name Joseph J. Gilmartin, III	Vice President Name Virginia M. Gilmartin
Street Address 1293 Post Road	Street Address 1293 Post Road
City: Warwick State: RI Zip: 02888	City: Warwick State: RI Zip: 02888
Secretary Name Virginia M. Gilmartin	Treasurer Name Joseph J. Gilmartin, III
Street Address 1293 Post Road	Street Address 1293 Post Road
City: Warwick State: RI Zip: 02888	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 n/a	Director Name
Street Address	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	Class/Series	Par Value
100 COMM NO PAR VALUE		

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

ISSUED 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



36599 DBC 01/06/05 12:16:23 PM
 File Date: 1-26-05
 Check No.: 35477
 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] 1/13/05
 Signature of Officer Date
 Joseph J. Gilmartin, III
 Print or Type Name of Officer
 President
 Title of Officer



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. *36599*		2. Name of Corporation J.J. Gilmartin & Son Agency, Inc.			
3. Street Address Principal Business Office 1293 POST ROAD			City WARWICK	State RI	Zip 02888
4. Business Phone No. 4017812100		5. State of Incorporation RHODE ISLAND			6. SIC Code 5702

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

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

President Name JOSEPH J. GILMARTIN, III			Vice President Name VIRGINIA M. GILMARTIN		
Street Address 1293 POST ROAD			Street Address 1293 POST ROAD		
City WARWICK	State RI	Zip 02888	City WARWICK	State RI	Zip 02888
Secretary Name VIRGINIA M. GILMARTIN			Treasurer Name JOSEPH J. GILMARTIN, III		
Street Address 1293 POST ROAD			Street Address 1293 POST ROAD		
City WARWICK	State RI	Zip 02888	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 N/A			Director Name		
Street Address			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) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	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



* 3 6 5 9 9 *

**36599* 1/9/0311:58:20 AM*

File Date 5.10.04

Check No. 34919

By: JD

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 4/14/04
Joseph J. Gilmartin, III
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. *36599*		2. Name of Corporation J.J. Gilmartin & Son Agency, Inc.			
3. Street Address Principal Business Office 1293 POST ROAD			City WARWICK	State RI	Zip 02888
4. Business Phone No. 4017812100		5. State of Incorporation RHODE ISLAND			6. SIC Code 5702
7. Brief Description of the Character of Business Conducted in Rhode Island INSURANCE AGENCY					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JOSEPH J. GILMARTIN, III			Vice President Name VIRGINIA M. GILMARTIN		
Street Address 1293 POST ROAD			Street Address 1293 POST ROAD		
City WARWICK	State RI	Zip 02888	City WARWICK	State RI	Zip 02888
Secretary Name VIRGINIA M. GILMARTIN			Treasurer Name JOSEPH J. GILMARTIN, III		
Street Address 1293 POST ROAD			Street Address 1293 POST ROAD		
City WARWICK	State RI	Zip 02888	City WARWICK	State RI	Zip 02888
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name N/A			Director Name		
Street Address			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) <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
100	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



* 3 6 5 9 9 *

**36599* 1/9/03 11:58:20 AM*

File Date 1-28-03

Check No. 34098

By: UP

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.

Joseph J. Gilmartin, III 1/17/03
Signature of Officer Date
Joseph J. Gilmartin, III
Print or Type Name of Officer
President
Title of Officer



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. **36599** 2. Name of Corporation **J.J. Gilmartin & Son Agency, Inc.**
3. Street Address Principal Business Office **1293 Post Road** City **Warwick** State **RI** Zip **02888**
4. Business Phone No. **781-2100** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5702**

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

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

President Name Joseph J. Gilmartin, III	Vice President Name Virginia M. Gilmartin
Street Address 1293 Post Road	Street Address 1293 Post Road
City State Zip Warwick RI 02888	City State Zip Warwick RI 02888
Secretary Name Virginia M. Gilmartin	Treasurer Name Joseph J. Gilmartin, III
Street Address 1293 Post Road	Street Address 1293 Post Road
City State Zip Warwick RI 02888	City State Zip Warwick RI 02888

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

Director Name n/a	Director Name
Street Address	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
100 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



* 3 6 5 9 9 *

File Date: 2-19-02
Check No.: 33542
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: 2/14/02
Joseph J. Gilmartin, III
President



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. **36599** 2. Name of Corporation **J.J. Gilmartin & Son Agency, Inc.**
3. Street Address Principal Business Office **1293 Post Road** City **Warwick** State **RI** Zip **02888**
4. Business Phone No. **781-2100** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5702**

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

insurance agency

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

President Name			Vice President Name		
Joseph J. Gilmartin, III			Virginia M. Gilmartin		
Street Address			Street Address		
1293 Post Road			1293 Post Road		
City	State	Zip	City	State	Zip
Warwick	RI	02888	Warwick	RI	02888
Secretary Name			Treasurer Name		
Virginia M. Gilmartin			Joseph J. Gilmartin, III		
Street Address			Street Address		
1293 Post Road			1293 Post Road		
City	State	Zip	City	State	Zip
Warwick	RI	02888	Warwick	RI	02888

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

Director Name			Director Name		
None					
Street Address			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
100 NO PAR COM

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



* 3 6 5 9 9 *

File Date: 2/7

Check No.: 32950

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.

Joseph J. Gilmartin III 2/2/01
Signature of Officer Date

Joseph J. Gilmartin III
Print or Type Name of Officer

President
Title of Officer



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. **36599** 2. Name of Corporation **J.J. Gilmartin & Son Agency, Inc.**

3. Street Address Principal Business Office **1293 Post Road** City **Warwick** State **RI** Zip **02888**
4. Business Phone No. **781-2100** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5702**

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

insurance agency

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

President Name Joseph J. Gilmartin, III Street Address 1293 Post Road City Warwick State RI Zip 02888	Vice President Name Virginia M. Gilmartin Street Address 1293 Post Road City Warwick State RI Zip 02888
Secretary Name Virginia M. Gilmartin Street Address 1293 Post Road City Warwick State RI Zip 02888	Treasurer Name Joseph J. Gilmartin III Street Address 1293 Post Road 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 None Street Address 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	Class/Series	Par Value
100 NO PAR COM		

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

ISSUED 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



* 3 6 5 9 9 *

File Date: 2/15/00
Check No.: 32426
By: DJM

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.

Joseph J. Gilmartin III 2/11/00
Signature of Officer Date

Joseph J. Gilmartin III

Print or Type Name of Officer
President

Title of Officer



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. **38599** 2. Name of Corporation **J.J. Gilmartin & Son Agency, Inc.**

3. Street Address Principal Business Office City State Zip
1293 Post Road **Warwick** **RI** **02888**

4. Business Phone No. 5. State of Incorporation 6. SIC Code
781-2100 **RHODE ISLAND** **5702**

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

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

President Name Joseph J. Gilmartin III	Vice President Name Virginia M. Gilmartin
Street Address 1293 Post Road	Street Address 1293 Post Road
City State Zip Warwick RI 02888	City State Zip Warwick RI 02888
Secretary Name Virginia M. Gilmartin	Treasurer Name Joseph J. Gilmartin III
Street Address 1293 Post Road	Street Address 1293 Post Road
City State Zip Warwick RI 02888	City State Zip Warwick RI 02888

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

Director Name None	Director Name
Street Address	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
	100	NO PAR COM	

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



File Date: 03-25-99
 Check No.: 13293
 By: JJD

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.

Joseph J. Gilmartin III Date 3/18/99
 Signature of Officer Date
Joseph J. Gilmartin III
 Print or Type Name of Officer
President
 Title of Officer



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. **36599** 2. Name of Corporation **J.J. Gilmartin & Son Agency, Inc.**
3. Street Address Principal Business Office **1293 Post Road** City **Warwick** State **RI** Zip **02888**
4. Business Phone No. **781-2100** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5702**
7. Brief Description of the Character of Business Conducted in Rhode Island **Insurance agency**

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

President Name Joseph J. Gilmartin III			Vice President Name Virginia M. Gilmartin		
Street Address 1293 Post Road			Street Address 1293 Post Road		
City	State	Zip	City	State	Zip
Warwick	RI	02888	Warwick	RI	02888
Secretary Name Virginia M. Gilmartin			Treasurer Name Joseph J. Gilmartin III		
Street Address 1293 Post Road			Street Address 1293 Post Road		
City	State	Zip	City	State	Zip
Warwick	RI	02888	Warwick	RI	02888

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

Director Name None			Director Name		
Street Address			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
100 NO PAR COM

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



File Date: 3/9
Check No.: 12522
By: lp

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.

Joseph J. Gilmartin III 2/26/98
Signature of Officer Date
Joseph J. Gilmartin III
Print or Type Name of Officer
President
Title of Officer



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. **36599** 2. Name of Corporation **J.J. Gilmartin & Son Agency, Inc.**
3. Street Address Principal Business Office **1293 Post Road** City **Warwick** State **RI** Zip **02888**
4. Business Phone No. **401-781-2100** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5702**

7. Brief Description of the Character of Business Conducted in Rhode Island
Insurance sales & service

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

President Name			Vice President Name		
Jos. J. Gilmartin, III			Jos. J. Gilmartin, III		
Street Address			Street Address		
15 Todd Street			15 Todd Street		
City	State	Zip	City	State	Zip
Warwick	RI	02888	Warwick	RI	02888
Secretary Name			Treasurer Name		
Virginia M. Gilmartin			Jos. J. Gilmartin, III		
Street Address			Street Address		
20 Greenwood Avenue			15 Todd Street		
City	State	Zip	City	State	Zip
Warwick	RI	02886	Warwick	RI	02888

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

Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

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

AUTHORIZED SHARES			ISSUED SHARES ✓		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR COM			100	No Par	Com

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



File Date: 2/7/97
Check No.: 30573
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: 1-30-97
Print or Type Name of Officer: Jos. J. Gilmartin, III
Title of Officer: President

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. 36599		2. NAME OF CORPORATION J.J. Gilmartin & Son Agency, Inc.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 1293 Post Road		CITY Warwick	STATE R9
4. BUSINESS PHONE NO. 401-781-2100		5. STATE OF INCORPORATION RHODE ISLAND	6. SIC CODE 5702
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Insurance Agency			

8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Joseph J. Gilmartin III			VICE PRESIDENT NAME Virginia Gilmartin		
STREET ADDRESS 15 Todd Street			STREET ADDRESS 202 Greenwood Ave		
CITY Warwick	STATE R9	ZIP CODE 02888	CITY Warwick	STATE R9	ZIP CODE 02886
SECRETARY NAME Virginia Gilmartin			TREASURER NAME Joseph J. Gilmartin III		
STREET ADDRESS 202 Greenwood Ave			STREET ADDRESS 15 Todd St		
CITY Warwick	STATE R9	ZIP CODE 02886	CITY Warwick	STATE R9	ZIP CODE 02888

9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
100	NO PAR COM	None			

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.

Joseph J. Gilmartin III
Signature of Officer

Jos. J. Gilmartin, III

Print or Type Name of Officer

Pres
Title of Officer

2/21/96
Date

File Date: 3/11/96

Check No: 29774

By: *u/cp*
For Secretary of State Use Only



ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0055589 Annual Report for the year: 1995

Name of Corporation: J. J. Gilmartin & Son Agency, Inc.

Business entity organized under the laws of the State of: Rhode Island
 For foreign entity, address and telephone number of principal office:

Business Entity is (check one):
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: (401) 781-2100
 Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
J. J. Gilmartin & Son Agency, Inc.
1293 Post Road
Warwick, RI 02888
 Phone: (401) 781-2100

Brief statement of the character of business conducted in Rhode Island:
Insurance Sales & Service

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Jos. J. Gilmartin, Jr.	202 Greenwood Avenue	Warwick, RI	02886
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Jos. J. Gilmartin, III	15 Todd Street	Warwick, RI	02888
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Virginia M. Gilmartin	202 Greenwood Avenue	Warwick, RI	02886
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Jos. J. Gilmartin, Jr.	202 Greenwood Avenue	Warwick, RI	02886

THE NAMES OF THE DIRECTORS ARE:

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	Class / Series	Number of Shares	Class / Series
100	Common	100	Common

Date: Jan 23, 1995 By: Jos. J. Gilmartin, Jr.
 Form 31 1995 PRINTOR TYPE NAME OF OFFICER SIGNING
 TITLE OF OFFICER SIGNING
President

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

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

JOHN G. EARLE
 228 JEFFERSON BOULEVARD
 WARWICK RI 02888

PAID
 JAN 24 1995
 SECY OF STATE

Filing Fee \$5.00
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: 0036599 Annual Report for the year: 1994

Name of Business Entity: J. J. Gilmartin & Son Agency, Inc.

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

Federal Taxpayer Identification Number: [REDACTED]

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

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

J. J. Gilmartin & Son Agency, Inc.
1293 Post Road
Warwick, RI 02888

Phone: 401 781-2100 ()

Business Entity is (check one)

- Business Corporation (See RIGL Chapter 7-1.1)
- Professional Service Corporation (See RIGL Chapter 7-5.1)
- Limited Liability Company (See RIGL 7-16)

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

Jos. J. Gilmartin, Jr. - Pres.

Brief statement of the character of business conducted in Rhode Island:

Insurance sales and service

Date of Organization: 9/69 11/27/85 Cco

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

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY STATE	ZIP CODE
<input checked="" type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (SEE 7-1.1)	Jos. J. Gilmartin, Jr.	202 Greenwood Avenue Warwick, RI	02886
<input checked="" type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (SEE 7-5.1)	Jos. J. Gilmartin, III	15 Todd Street, Warwick, RI	02888
<input type="checkbox"/> CLERK/CLERK OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (SEE 7-1.1)	Virginia M. Gilmartin	202 Greenwood Avenue Warwick, RI	02888
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (SEE 7-1.1)	Jos. J. Gilmartin, Jr.	202 Greenwood Avenue Warwick, RI	02886

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY STATE	ZIP CODE
NAME	STREET ADDRESS	CITY STATE	ZIP CODE
NAME	STREET ADDRESS	CITY STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 100

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 100

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR

Date Feb. 7, 1994

By: [Signature]

Jos. J. Gilmartin, Jr.

President

TITLE OF OFFICER SIGNING

FILED

FEB 11 1994

Form 31 1994

By [Signature]

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

JOHN S. EARLE
332 JEFFERSON BOULEVARD
WARWICK RI 02888

State of Rhode Island and Providence Plantations

J. J. Gilmartin & Son

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0036599 Annual Report for the year 1993

FIRST: The name of the corporation is J. J. Gilmartin & Son Agency, Inc.

SECOND: It is incorporated under the laws of State of Rhode Island

THIRD: Character of business, briefly stated, is Insurance Agency

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

1293 Post Road, Warwick, R. I. 02888

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

Name Office Address (including number, street, zip code)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
<u>Jos. J. Gilmartin, Jr.</u>	<u>President</u>	<u>202 Greenwood Avenue, Warwick, R. I.</u>
<u>Jos. J. Gilmartin, III</u>	<u>Vice President</u>	<u>15 Todd Street, Warwick, R. I.</u>
<u>Virginia M. Gilmartin</u>	<u>Secretary</u>	<u>202 Greenwood Avenue, Warwick, R.I.</u>
<u>Jos. J. Gilmartin, Jr.</u>	<u>Treasurer</u>	<u>202 Greenwood Avenue, Warwick, R. I.</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class
<u>100</u>	<u>Common</u>

PAID

Series
FEB 19 1993

SECY OF STATE

Par Value or statement that shares are without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series
<u>100</u>	<u>Common</u>	

Par Value or statement that shares are without par value

Dated February 18, 19 93

J. J. GILMARTIN & SON AGENCY, INC.
(Name of Corporation)

By *J. J. Gilmartin, Jr.*
Jos. J. Gilmartin, Jr.
Title President - Treasurer

(Report must be signed by an officer)

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

DKB# 25828

Corporate ID 0036599 Annual Report for the year 1992

FIRST: The name of the corporation is J. J. Gilmartin & Son Agency, Inc.

SECOND: It is incorporated under the laws of State of Rhode Island

THIRD: Character of business, briefly stated, is Insurance Agency

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

1293 Post Road, Warwick, Rhode Island 02888

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

Name	Office	Address (including number, street, zip code)
<u>Jos. J. Gilmartin, Jr.</u>	<u>Director</u>	<u>202 Greenwood Avenue, Warwick, R. I.</u>
<u>Jos. J. Gilmartin, III</u>	<u>Director</u>	<u>15 Todd Street, Warwick, R. I.</u>
<u>Virginia M. Gilmartin</u>	<u>Director</u>	<u>202 Greenwood Avenue, Warwick, R. I.</u>
<u>Jos. J. Gilmartin, Jr.</u>	<u>President</u>	<u>202 Greenwood Avenue, Warwick, R. I.</u>
	<u>Vice President</u>	
	<u>Secretary</u>	
	<u>Treasurer</u>	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>100</u>	<u>Common</u>	PAID	

MAR 02 1992

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>100</u>	<u>Common</u>		

SECY OF STATE

Dated February 28, 19 92

J. J. GILMARTIN & SON AGENCY, INC.

(Name of Corporation)

By J. J. Gilmartin, Jr.

Title President - Treasurer

(Report must be signed by an officer)

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 0036599 Annual Report for the year 1991

FIRST: The name of the corporation is J. J. Gilmartin & Son Agency, Inc.

SECOND: It is incorporated under the laws of State of Rhode Island

THIRD: Character of business, briefly stated, is Insurance Agency

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

1293 Post Road, Warwick, Rhode Island 02888

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Jos. J. Gilmartin, Jr.	President	202 Greenwood Ave., Warwick, R. I.
Jos. J. Gilmartin, III	Vice President	15 Todd Street, Warwick, R. I.
Virginia M. Gilmartin	Secretary	202 Greenwood Avenue, Warwick, R. I.
Jos. J. Gilmartin, Jr.	Treasurer	202 Greenwood Avenue, Warwick, R. I.

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series
100	Common	

Par Value
or statement that
shares are without
par value

EIGHTH: Number of Shares issued:

No. of Shares	Class
100	Common

Par Value
or statement that
shares are without
par value

PAID
FEB 25 1991
REC'D OF STATE

Dated February 22, 19 91

J. J. GILMARTIN & SON AGENCY, INC.
(Name of Corporation)

By
Jos. J. Gilmartin, Jr.
Title President - Treasurer

(Report must be signed by an officer)

Filing Fee \$15.00

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 0035532 Annual Report for the year 1990

FIRST: The name of the corporation is J. J. Gilmartin & Son Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Insurance Agency

FOURTH: If foreign corporation, address of its principal office

N/A

FIFTH: Business address in Rhode Island

1293 Post Road, Warwick, Rhode Island 02888

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Jos. J. Gilmartin, Jr.	President	202 Greenwood Ave., Warwick, R. I.
Jos. J. Gilmartin, III	Vice President	15 Todd Street, Warwick, R. I.
Virginia M. Gilmartin	Secretary	202 Greenwood Avenue, Warwick, R. I.
Jos. J. Gilmartin, Jr.	Treasurer	202 Greenwood Avenue, Warwick, R. I.

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No par value

PAID

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No par value

Dated February 2, 19 90

J. J. GILMARTIN & SON AGENCY, INC.

(Name of Corporation)

By Jos. J. Gilmartin, Jr.

Title Treasurer - President

(Report must be signed by an officer)

Filing Fee \$15.00

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 0036599 Annual Report for the year 1989

FIRST: The name of the corporation is J.J. Gilmartin & Son Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Insurance Agency

FOURTH: If foreign corporation, address of its principal office

N/A

FIFTH: Business address in Rhode Island 1293 Post Road, Warwick, R. I. 02888

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Jos. J. Gilmartin, Jr.	President	202 Greenwood Avenue, Warwick, R. I.
Jos. J. Gilmartin, III	Vice President	15 Todd Street, Warwick, R. I.
Virginia M. Gilmartin	Secretary	202 Greenwood Avenue, Warwick, R. I.
Jos. J. Gilmartin, Jr.	Treasurer	202 Greenwood Avenue, Warwick, R. I.

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No par value

PAID
FEB 6 1989
REC'D OF STATE

Dated February 3, 19 89

J. J. Gilmartin & Son Agency, Inc.
(Name of Corporation)
By Jos. J. Gilmartin, Jr.
Title Pres. & Treasurer

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 36599 Annual Report for the year 1988

FIRST: The name of the corporation is J. J. Gilmartin & Son Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Insurance Agency

FOURTH: If foreign corporation, address of its principal office

N/A

FIFTH: Business address in Rhode Island 1293 Post Road, Warwick, R. I. 02888

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

Name Office Address (including number, street, zip code)

Director

Director

Director

Jos. J. Gilmartin, Jr. President 202 Greenwood Avenue, Warwick, R. I.

Jos. J. Gilmartin, 111 Vice President 15 Todd Street, Warwick, R. I.

Virginia M. Gilmartin Secretary 202 Greenwood Avenue, Warwick, R. I.

Jos. J. Gilmartin, Jr. Treasurer 202 Greenwood Avenue, Warwick, R. I.

SEVENTH: Number of Shares authorized:

No. of Shares

Class

PAID

Par Value
or statement that
shares are without
par value

100

Common

JAN 27 1988

No par value

SECY. OF STATE

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

Common

JAN 28 1988

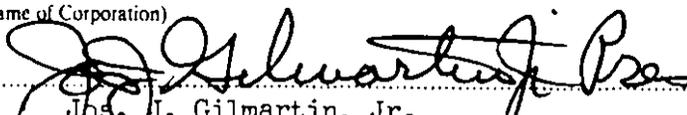
No par value

Dated Jan. 25, 19 88

J. J. Gilmartin & Son Agency, Inc.

(Name of Corporation)

By



Jos. J. Gilmartin, Jr.

Title Pres. & Treasurer

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 36599 Annual Report for the year 1987

FIRST: The name of the corporation is J.J. Gilmartin & Son Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Insurance Agency

FOURTH: If foreign corporation, address of its principal office

N/A

FIFTH: Business address in Rhode Island

1293 Post Road, Warwick, R. I. 02888

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

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Jos. J. Gilmartin, Jr.	President	202 Greenwood Ave., Warwick, R. I.
Jos. J. Gilmartin, III	Vice President	158 Camden Road, Narragansett, R. I.
Virginia M. Gilmartin	Secretary	202 Greenwood Ave., Warwick, R. I.
Jos. J. Gilmartin, Jr.	Treasurer	202 Greenwood Ave., Warwick, R. I.

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	PAID	no par value

JAN 29 1987

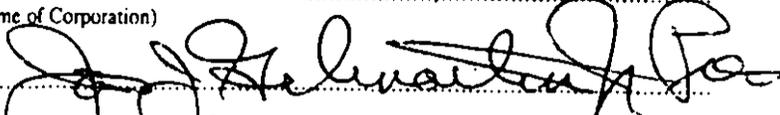
EIGHTH: Number of Shares issued:

SECY. OF STATE

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		no par value

Dated Jan. 20, 19 87.

J. J. GILMARTIN & SON AGENCY, INC.
(Name of Corporation)

By 
Title Jos. J. Gilmartin, Jr.
Treasurer

(Report must be signed by an officer)

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

36599

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1986

FIRST: The name of the corporation is J.J. Gilmartin & Son Agency, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is insurance agency

FOURTH: If foreign corporation, address of its principal office

N/A

FIFTH: Business address in Rhode Island

10 Jefferson Blvd., Warwick, RI 02888

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
J.J. Gilmartin, Jr.	President	202 Greenwood Ave., Warwick, RI
J.J. Gilmartin, III	Vice President	158 Camden Road, Narragansett, RI
Virginia Gilmartin	Secretary	202 Greenwood Ave., Warwick, RI
J.J. Gilmartin, Jr.	Treasurer	202 Greenwood Ave., Warwick, RI

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	common	PAID	no par value

APR 11 1986

EIGHTH: Number of Shares issued: OF STATE

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	common		no par value

Dated: February 19 19 86

J.J. Gilmartin & Son Agency, Inc.

(Name of Corporation)

By Joseph J. Gilmartin, Jr.
Title President

JUN 27 ENTD

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040