



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023  
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

**FILED**

MAR 27 2023

BY

1. Entity ID Number 36599		2. Exact name of the Corporation J.J. Gilmartin & Son Agency, Inc.	
3. Principal Office Address 1293 Post Road		City Warwick	State RI
		Zip 02888	
4. NAICS Code 52410	6. Brief description of the character of business conducted in Rhode Island general business and insurance purposes;		
5. State of Incorporation Rhode Island			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name Joseph J. Gilmartin, III		Vice-President Name Joseph J. Gilmartin, III	
Street Address 1293 Post Road		Street Address 1293 Post Road	
City Warwick	State RI	City Warwick	State RI
Zip 02888		Zip 02888	
Secretary Name Joseph J. Gilmartin, III		Treasurer Name Joseph J. Gilmartin, III	
Street Address same		Street Address same	
City	State	City	State
Zip		Zip	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
		NUMBER OF SHARES 50	CLASS/SERIES common
			PAR VALUE no par value
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the 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.			
Name of Authorized Representative Joseph J. Gilmartin, III - President		Date 3/26/23	
Signature of Authorized Representative 			

MAIL TO:  
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