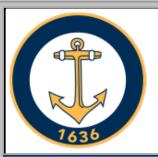
RI SOS Filing Number: 202448924760 Date: 3/20/2024 8:26:00 AM



## State of Rhode Island Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

**Business Corporation Annual Report** 

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR **2024**: 2024

1. Corporate ID No. 000099667

2. Name of Corporation GATES INSURANCE AGENCY, INC.

3. Street Address Principal Business Office:

No. and Street: 238 ROBINSON STREET

City or Town: WAKEFIELD State: RI Zip: 02879 Country: USA

4. Business Phone No.

401-789-3071

5. State of Incorporation

State: RI

## **NAICS CODE**

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.

524210

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

OPERATION OF AN INSURANCE AGENCY; SELLING INSURANCE PRODUCTS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID R GATES	333C HIGH STREET PEACE DALE, RI 02879 USA
TREASURER	DAVID R GATES	333 HIGH STREET PEACE DALE, RI 02879 USA

## 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per		Total Issued and
		Share	Total Authorized	Outstanding
			Shares	Num of
			Number of Shares	Shares
STK		\$0.0000	1,000.00	1000

9. 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.

**Signed this 20 Day of March, 2024 at 8:33:38 AM.** This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

## By **DAVID R GATES**

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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