



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. **39626** 2. Name of Corporation **Marine & Auto Savings, Inc.**

3. Street Address Principal Business Office _____ City _____ State _____ Zip _____

4. Business Phone No. _____ 5. State of Incorporation **RHODE ISLAND** 6. SIC Code _____

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

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

President Name	Vice President Name
Street Address	Street Address
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Secretary Name	Treasurer Name
Street Address	Street Address
City _____ State _____ Zip _____	City _____ State _____ Zip _____

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

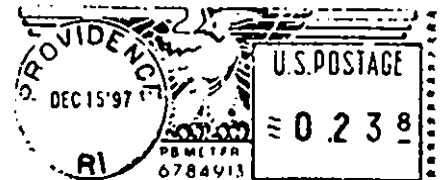
Director Name	Director Name
Street Address	Street Address
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Director Name	Director Name
Street Address	Street Address

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FIRST CLASS



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895 MENDON RD
CUMBERLAND RI 02864-5315
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1. AUTO 02860

