| No. <b>C 203698</b>  |              | Due no later than Oct 31, 2017  |  | 2. Registered Ag                           | 2. Registered Agent and Address (NO PO BOX)   |         |             |  |
|--|--------------|---|--|--|---|---------|-------------|--|
| Return to:  SECRETARY OF STATE  700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 |              | Annual Report Form  1. Mailing Address: Correct in this box if needed.  ROGERS & GRAY INSURANCE AGENCY, INC.  434 ROUTE 134 STE F1  SOUTH DENNIS MA 02660 |  | 700 W STATE<br>ATT BILL DEA<br>BOISE ID 8: | IDAHO DEPT OF INSURANCE 700 W STATE ST FL 3 ATT BILL DEAL BOISE ID 83702  3. New Registered Agent Signature:* |         |             |  |
| RECEIVED BY  | DUE DATE     | ess Addresses of  | President, Secretary, and Directors. Treas | surer (ontional)                           |   |         |             |  |
| Office Held  | Name         | ess Addresses of  | Street or PO Address                       | City                                       | State   | Country | Postal Code |  |
| SECRETARY  | SANDRA RO    | BINSON  | 434 ROUTE 134                              | SO. DENNIS                                 | MA  | USA     | 02660       |  |
| TREASURER  | JAMES R LO   | OPES  | 434 ROUTE 134                              | SO. DENNIS                                 | MA  | USA     | 02660       |  |
| DIRECTOR   | ROBERT BIZAK |   | 434 ROUTE 134                              | SO. DENNIS                                 | MA  | USA     | 02660       |  |
| DIRECTOR   | CHARLES N    | ROBINSON  | 434 ROUTE 134                              | SO. DENNIS                                 | MA  | USA     | 02660       |  |
| DIRECTOR   | MICHAEL C    | ROBINSON  | 434 ROUTE 134                              | SO. DENNIS                                 | MA  | USA     | 02660       |  |
| PRESIDENT  | DAVID T RO   | DBINSON   | 434 ROUTE 134                              | SO. DENNIS                                 | MA  | USA     | 02660       |  |
| 5. Organized Under the Laws of:  |              | 6. Annual Report  | must be signed.*                           |  |   |         |             |  |
| MA<br>C 203698   |              | Signature: James Lopes  |  |  | Date: 08/22/2017  |         |             |  |
|  |              | Name (type o  | print): James Lopes                        |  | Title: Treasurer  |         |             |  |
| Processed 08/22/2017   | ,            | * Electronically pr   | ovided signatures are accepted as original | al signatures.                             |   |         |             |  |