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Mar 20 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P18945** (6)

1. Corporation Name  
**AMICA GENERAL AGENCY, INC.**

Principal Place of Business  
**LINCOLN CENTER BLVS  
10 LINCOLN CENTER BLVD.  
LINCOLN RI 02865  
US**

Mailing Address  
**P.O. BOX 8008  
PROVIDENCE RI 02940  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**04/22/1988**

4. FEI Number  
**05-0430401**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be  
Added to Fees**

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 One Hundred Amica Way

Suite, Apt. #, etc.

22 City & State

23 Lincoln, RI

24 Zip  
02865

25 Country  
USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30 Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **CEO** ☐ DELETE  
NAME **TAYLOR, THOMAS A.**  
STREET ADDRESS **5 BROOK ROAD**  
CITY - ST - ZIP **SWANSEA MA**

TITLE **VP** ☐ DELETE  
NAME **HITCHEN, HAROLD**  
STREET ADDRESS **120 CRYSTAL DRIVE**  
CITY - ST - ZIP **E. GREENWICH RI**

TITLE **VP** ☐ DELETE  
NAME **NEAL, CARL R.**  
STREET ADDRESS **108 BEACH STREET**  
CITY - ST - ZIP **WICKFORD RI**

TITLE **D** ☐ DELETE  
NAME **SMITH, LOWELL G.**  
STREET ADDRESS **DUDLEY HILLS**  
CITY - ST - ZIP **DUDLEY MA**

TITLE **D** ☐ DELETE  
NAME **FAULKNER, ROBERT**  
STREET ADDRESS **228 RUMSTICK ROAD**  
CITY - ST - ZIP **BARRINGTON RI**

TITLE **D** ☐ DELETE  
NAME **GOODY, DONALD R.**  
STREET ADDRESS **22 BARROWS DRIVE**  
CITY - ST - ZIP **E. GREENWICH RI**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP  
**SEE ATTACHED**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Peter F. Goldbecker

3/13/98 (401) 334-6000

CR2E034 (10/97)

**Amica General Agency, Inc.**  
One Hundred Amica Way

A Subsidiary of  
Amica Life Insurance Company

**CORPORATE OFFICE**

~~100 Amica Center Boulevard~~, Lincoln, Rhode Island

Mail: PO Box 6008, Providence, RI 02940-6008  
(401) 334-6000  
Toll Free: 1-800-234-LIFE

Web Site: [www.amica.com](http://www.amica.com)

**Amica**

Thomas A. Taylor	President and Chief Executive Officer	5 Brook Road Swansea, MA 02777
Carl R. Neal	Sr. Vice President and General Manager	106 Beach St. Wickford, RI 02865
Robert A. DiMuccio	Sr. Vice President and Treasurer	6 Intervale Dr. Cumberland, RI 02864
Kenneth H. Nails	Sr. Vice President and General Counsel	275 Gilbert Stuart Dr. E. Greenwich, RI 02818
✓ Peter F. Goldbecker	Vice President and Secretary	9 Barn Dr. Cumberland, RI 02864
Robert K. Benson	Sr. Vice President	29 Melrose Ave. Barrington, RI 02806
Mary Q. Williamson	Vice President	450 Wakefield St. W. Warwick, RI 02895
David G. Fairweather	Vice President	48 Shore Drive Charlestown, RI 02813
Stephen F. Dolan	Asst. Vice President	8 Ridgeland Drive Cumberland, RI 02864
Bruce W. Thomas	Asst. Vice President	164 Cameron Street Pawtucket, RI 02861
Nyles L. Kruger	Agency Officer	11 Arbor Way No. Kingstown, RI 02852
Frank Muscat	Agency Officer	5 Major Potter Road Warwick, RI 02886
Gary Bilotti	Agency Officer	2 Burr Avenue Barrington, RI 02806

### DIRECTORS

Joel N. Tobey  
6 Harbour Rd.  
Barrington, RI

Lowell C. Smith  
1618 S.E. Edith Esplanade  
Cape Coral, FL 33904

W. Lawrence George  
1 Colonial Village  
Falmouth, ME 04105

Robert R. Faulkner  
228 Rumstick Rd.  
Barrington, RI 02806

Henry S. Woodbridge, Jr.  
100 Kings Highway  
Pomfret, CT 06258

Peter B. Freeman  
100 Alumni Ave.  
Providence, RI 02906

Donald R. Goodby  
22 Barrows Dr.  
E. Greenwich, RI 02818

Patricia W. Chadwick  
31 Hillcrest Park Rd.  
Old Greenwich, CT 06870

Thomas A. Taylor  
5 Brook Road  
Swansea, MA 02777

Jeffrey P. Aiken  
1071 E. Circle Drive  
Whitefish Bay, WI 53217