



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* 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.

1. Corporate ID No. 110413		2. Name of Corporation MARSH INSURANCE & INVESTMENTS CORP.			
3. Street Address Principal Business Office 121 RIVER ST TAX DEPT - 11TH FL			City HOBOKEN	State NJ	Zip 07030
4. Business Phone No. 201-284-4000		5. State of Incorporation DELAWARE			
6. Brief Description of the Character of Business Conducted in Rhode Island INSURANCE BROKER					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name CHARLES LEDBETTER			Vice President Name JOSEPH GIGLIOTTI		
Street Address 1225 17TH ST SUITE 2100			Street Address 121 RIVER ST		
City DENVER	State CO	Zip 80202	City HOBOKEN	State NJ	Zip 07030
Secretary Name BARRY KERSCHNER			Treasurer Name ALAN BIELER		
Street Address 1166 AVE OF THE AMERICAS			Street Address 1166 AVE OF THE AMERICAS		
City NEW YORK	State NY	Zip 10036	City NEW YORK	State NY	Zip 10036
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			1,000	COMMON	1.

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.

File Date	FILED
Check No.	FEB 13 2009
By:	By 11/21/09
FOR SECRETARY OF STATE USE ONLY	

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.

Signature Joseph Gigliotti Date 1/30/09
JOSEPH GIGLIOTTI
Print or Type Name
VICE PRESIDENT
Title