RI SOS Filing Number: 200943200770 Date: 03/02/2009 11:37 AM

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

Fee: $50.00

Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615
Telephone: (401) 222-3040

Foreign Business Corporation
Annual Report

Filing Period: January 1 - March 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: 2009

1. Corporate ID No. 000120086

2. Name of Corporation Chickering Benefit Planning Insurance Agency, Inc.

3. Street Address Principal Business Office:

No. and Street: ONE CHARLES PARK
City or Town: CAMBRIDGE State: MA Zip: 02142-1254 Country: USA

4. Business Phone No.

617-582-5000

5. State of Incorporation

State: MA

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

STUDENT HEALTH BUSINESS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	KATHARINE N. BEGLEY	ONE CHALES PARK CAMBRIDGE, MA 02142 USA
TREASURER	ALFRED P. AUIRK	151 FARMINGTON AVE. HARTFORD, CT 06156 USA
SECRETARY	EDWARD C. LEE	151 FARMINGTON AVE. HARTFORD, CT 06156 USA
VICE PRESIDENT	MARYELLEN PEASE	ONE CHARLES PARK CAMBRIDGE, MA 02142 USA
DIRECTOR	KATHARINE N. BEGLEY	ONE CHARLES PARK CAMBRIDGE, MA 02142 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
CNP		$0.00	1,000.00	250

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 2 Day of March, 2009 at 11:38:43 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 VENUS SCHROETER
Signature of Authorized Representative of the Corporation

AUTHORIZED REPRESENTATIVE OF THE CORPORATION
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07