

FOR SECRETARY OF STATE USE ONLY

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335

401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005 Filing Period: January 1 - March 1 Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) L. Corporate ID No 2. Name of Corporation 4598 Compensation Planning Inc. 3 Street Address Principal Business Office Jetterson 02888 Warwick 5. State of Incorporation 6 SIC Code (401) RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island
DESIGN AND ADMINISTRATION OF QUALIFIED RETIREMENT PLANS 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name 3ame as president Middle Koao State Street Address State Z.ij) City State 2.0 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Street Address Street Address State Zip Director Name Street Address Street Address City State Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 1,000 NO PAR VALUE *50*0 This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee 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 co 2-9-05 File Date Check No.

Principallype Name of Officer

resident

Form 630 Rev. 12/03



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Matthew A. Brown, Secretary of State .

Corporations Division 100 North Main Street Providence, RI 02903-1335

Form 630 Rev. 12/03

401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 4598 Compensation Planning Inc. State RI 3 Street Address Principal Business Office Warwick ባጛጸዳዲ Jefterson Blue 5. State of Incorporation 6. SIC Code (401) 223-555 RHODE ISLAND 7286 7. Brief Description of the Character of Business Conducted in Rhode Island DESIGN AND ADMINISTRATION OF QUALIFIED RETIREMENT PLANS 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Street Address Michile. City State Zip State ZIp 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Street Address Street Address City State Zip City Zip State Director Name Street Address Street Address City City Zip State Zip State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) **AUTHORIZED SHARES** ISSUED SHARES Number of Shares Class/Series Number of Shares Par Value Class/Series Par Value 500 1,000 NO PAR VALUE This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee 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 of Officer Check No. FOR SECRETARY OF STATE USE ONLY

Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PLE VSF READ INSTRUCTIONS

CORM MUST BE TYPED OR PRIN	TED IN BLACKS				
1. Corporate ID No.	2. Name of Corpore	ıtio n			
4598	Compensat	ion Planning Inc.			
3. Street Address Principal Business		•	City	State	Zip
67 Jefferson Bo 4 Business Phone No		5 State of Incorporation	Warwick	RI	02888 6. SIC Code
(401) 223 - 5554 7 Brief Description of the Characte) or of Business Conducted	RHODE ISLAND			7 2 86
Design & aa 8. names and addres	Immistration C	of qualified retrient	ent plans IMENT) FILLIN SPACE	S BEFORE USING ATTA	CHMENTS
President Name			Vice President Name	S DEL ORE CARRO ATTA	CHARAIS
Jeffrey A. 538 Mia	Brown		Same a	is President	
538 Mid East Creenwich	ldle Rd.	Zip	Спу	State	Zip
Secretary Name		02818	Treasurer Name	0	• . • • • •
Street Address	President		Street Address	is President	
City	State	Zip	City	State	Zip
9. NAMES AND ADDRES	SES OF THE DIR	ECT ORS ("x" box for atta	CHMENT) FILL IN SPAC	CES BEFORE USING AT	TACHMENTS
Street Address			Street Address		
City	State	Zip	City	State	710
Director Name	•		Director Name		
Street Address			Street Address		
Eity	State	Zip	City	State	Zip
10. SHARES AUTHORIZE	D ("X" BOX FOR ATT.	ACHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACHMEN	!T)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			500	,	Nopar

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

* 4 5 9 8 *	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements.	
File Date:	that all statements contained herein are true and correct. 1/20/03 Date	
By: FOR SECRETARY OF STATE USE ONLY	Teffice A. Brown Print or Type Name of Afficer President Title of Officer Form 630 12	 192



Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street. Providence. RI 02903-1335 401-222-3040

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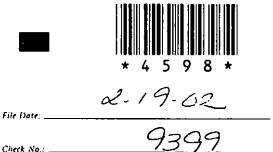
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

STOP PLEASE READ INSTRUCTIONS

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 4598 Compensation Planning Inc. 3. Street Address Principal Business Office Cliv State 67 Jefferson Boulevard Business Phone No. Warwick RI 02888 5. State of Incorporation 6. SIC Coile 7286 (401) 223-5555 **RHODE ISLAND** 7. Brief Description of the Character of Business Conducted in Rhode Island Design and administration of qualified retirement plans 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Jeffrey A. Brown Same as President Street Address Street Address 538 Middle Road City ZIP 02818 RI East Greenwich Secretary Name Treasurer Name Same as President Same as President Street Address Street Address State ZIp City State Zip 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Jeffrey A. Brown Street Address Street Address 538 Middle Road State City State Zip 02818 RΙ East Greenwich Director Name Director Name Street Address Street Address City State State 210 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) AUTHORIZED SHARES (STUES) SHARES Number of Shares Class/Series Number of Shares Class/Serles Par Value 1,000 NO PAR VALUE No Par 500

This report must be signed in Ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Title of Office



FOR SECRETARY OF STATE USE ONLY

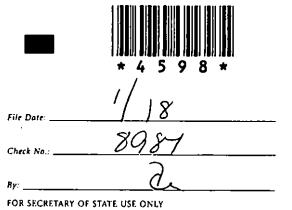
Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

STOP PLEASI, READ INSTRUCTIONS

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 4598 2. Name of Corporation
Compensation Planning Inc. 3. Street Address Principal Business Office State 67 Jefferson Boulevard Warwick RI 02888 4. Business Phone No. 5. State of Incorporation RHODE ISLAND 6. 42 88 (401) 223-5555 7. Bilef Description of the Character of Business Conducted in Rhode Island Design and administration of qualified retirement plans 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Jeffrey A. Brown Same as President Street Address Street Address 538 Middle Road City Zip City State Zip East Greenwich, RI 02818 Secretary Name Treasurer Name Same as President Same as President Street Address Street Address City State Zip City State Zip 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS **Director Name** Director Name Jeffrey A. Brown Street Address Street Address 538 Middle Road City State 7.ip East Greenwich 02818 RI Director Name Director Name Street Address Street Address City State Cin Zip State Zip 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Serles Number of Shares Par Value Class/Series Par Value 1,000 SHS NO PAR VAL 500 No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee.





James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK) 1. Corporate 1D No. 2. Name of Corporation 4598 Compensation Planning Inc. 3 Street Address Principal Business Office State Zip 02886 615 Jefferson Boulevard Warwick RT 4. Business Phone No. 5. State of Incorporation 6. SIC Code (401) 738-8210 7286 RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island Design and Administration of Qualified Retirement Plans 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Same as President Jeffrey A. Brown Street Address Street Address 538 Middle Road City State Zip RI02818 East Greenwich Secretary Name Treasurer Name Same as President Same as President Street Address Street Address City State Zip City State Zip 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS** Director Name Director Name Jeffrey A. Brown Street Address Street Address 538 Middle Road City City State 210 02818 East Greenwich RΙ Director Name Director Name Street Address Street Address City State City Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

500



1,000 SHS NO PAR VAL

SEC'Y OF STATE

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 an statements contained herein are true and correct.

frey A. Brown

Print or Type Name of Officer

President

Title of Officer



No Par



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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I. Corporate ID No.	2. Name of Corporation			•	
4598	Compensatio	n Planning Inc.			
3. Street Address Principal Busine			City	State	Zip
615 JEFFERS			WARWICK	RY	02886
738 · 8210		5. State of incorporation		•	6. SIC Code 7286
7. Brief Description of the Charact		RHODE ISLAND			6666
			EN RETINEMENT	T DCASC	
8. NAMES AND ADDRE		- •			
President Name	SSES OF THE OFFIC	ER2 (.Y. BOX LOK VITYCH	MENT) FILL IN SPACES B Vice President Name	EFORE USING ATTA	CHMENTS
JEHFREY A	BROWN		Sime		
Street Address	_		Street Address		
538 Mios	NE KO				
City	State	Zip	City	State	Zip
EAST GREEN W	ICH PY	02818			•
Secretary Name	2.	•••	Treasurer Name		************
SAM	ne		SAME		
Street Address			Street Address		•
City	State	Zip	City	State	Zip
Director Name JEHPEY A Street Address 538 MID	BROWN DUE RD		Director Name NGNE Street Address		
City	State	21p	City	State	Zip
EAST GREENWICH	t Ry	02818			·
Director Name	. /	•• • • •	Director Name	********	···· ··· · · · · · · · · · · · · · · ·
NONE			NONE		
Street Address			Street Address		
City	· · · · · · · · · · · · · · · · · · ·				
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			0.50		750 1714
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This report must be sign	n ed in ink hv cither	r the President Vice De	esident, Secretary, Assist		uene Bacaires de Terres
	in in by citilet	e riegident, vice fi	caraciit, accietary, MSSISI	ant Secretary, 11692	uter, Receiver or ITUSTE

* 4 5 9 8 *	Under penalty of perjury, I declare and affirm that I have examined
File Date: 7909 Check No.:	this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
FOR SECRETARY OF STATE USE ONLY	METTER A BROWN Plint or Type Name of Officer Addidant Title of Officer



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

STOP PULASI READ INSTRUCTIONS

ening Perioa: January 1-March 1	•	Filing Fee: \$50.00	
(FORM MUST BE TYPED IN BLACK)			

2. Name of Corporation

1. Corporate 1D No.

4598 3. Street Address Principal Busines	u office Compensa	tion Planning Asso	clates incorporated	State	Zip
615 JEFFERSON BI	OULEVARD		WARWICK	RI	02886
F. Business Phone No.		S. State of Incorporation		. 101	6. SIC Code
(401) 738-8210		•			8888
7. Brief Description of the Charact	er of Business Conducted.	RHODE ISLA	AND		0000
			it plans and sale of	f incurance orog	lucts
B. NAMES AND ADDRE	SSES OF THE OFF	ICEBS /*Y* BOY FOR ATT	ACUMENT)	i modifice proc	iuc c3
President Name	SSES OF THE OFF.	ICERS (A BOX FOR ALL	Vice President Name	•	
Jeffrey A. Brown	า		Jeffrey A. Brow	un.	
treet Address	•		Street Address	VIII	
615 Jefferson Bl	lvd		615 Jefferson B	21 u.d	
Dity	State	Zip	City		
Warwick	RI	02886	Warwick	State	Zip
ecretary Name		02000		RI	02886
Jeffrey A. Brown	,		Treasurer Name		
treet Address	1		Jeffrey A. Brow	YM	
615 Jefferson Bl	lvd		Street Address	53	
			615 Jefferson E		
warwick	State RI	^{zı} , 02886	Cliy Manusi ak	State D.T.	Zip
	· · · -		Warwick	.RI	· 02886
P. NAMES AND ADDRES Director Name	SSES OF THE DIRI	ECTORS ("X" BOX FOR A			•
nrector Name			Director Name		
treet Address			Street Address		
lity	State	Zip	City	State	Zip
					•
Virector Name			Director Name		•
treet Address			Street Address		
lty	State	Zip	City	State	Zip
0. SHARES AUTHORIZE	D ("X" BOX FOR ATT)	ACHMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACHMENT	r)
UTHORIZED SHARES			ISSUED SHARES		
umber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 SHS NO PAR	VAL		500	Common	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

	* 4 5 9 8 *	
File Date:	3.18.98	
Check No.:	7452 M	
Ву:	100	
FOR SECRETA	RY 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.

Segnature file ficer

Peter or Type Name of Officer

Pile of Officer

Title of Officer



James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM	MUST	BE.	TYPED	IN	BLACK)
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I. Corporate ID No.

2. Name of Corporation

4598		tion Planning Asso	ciates Incorporated		
3. Street Address Principal Busi 615 . JFFFFRS	ness Office ON BOULEVARD		City WARWICK	Sinte RI	zıp 02886
4. Business Phone No. (401) 738- 7. Brief Description of the Ghar	8210 acter of Rusiness Conducted		n		6. SIC Code 8888
8. NAMES AND ADDR President Name Jeffrey A. Bro	RESSES OF THE OFF	-		·	uccs
Street Address 615 Jefferson	Blvd.		Street Address 615 Jefferson		
City Warwick Secretary Name Linda J. Spence	State RI	^{Zip} 02886	City Warwick Treasurer Name Jeffrey A. Br	State RI	02886
Street Address	C1		Street Address	OHII	
615 Jefferson	Blvd.		615 Jefferson	Blvd.	
Warwick	State RI	^{zip} 02886	cny Warwick	State RI	21p 02886
9. NAMES AND ADDR Director Name	RESSES OF THE DIR	ECTORS ("X" BOX FOR A	TTACHMENT) 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
10. SHARES AUTHOR!	IZED AND ISSUED (*X" BOX FOR ATTACHMENT			
Number of Shares	Class/Serles	Par Value	ISSUED SHARES Number of Shares	Class/Series	Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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Title of Officer

	* 4 5 9 8 *
File Date:	7-26-97
Theck No.: _	17015
ly:	1CP / Jal
OR SECRET	ARY OF STATE USE ONLY

1,000 SHS NO PAR VAL

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PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State

Corporations Division 100 North Main Street

Filing Period: January 1-March 1

iling Fee: \$50.00	warch 1		45	Providence, Rhode	Island 02905-1335 • (401) 277-304
		PLEASE TYPE OR	PRINT IN BLACK INK.		
1. CORPORATE ID NO.	2. NAME OF CORPORATION				
4598	Compen	sation Planning	Associates Incor	porated	
3 STREET ADORESS PRINCIPAL BUSINESS OF	ice .		an	STATE	, ZIP CODE
U15 Jefferson	Boulevard		Warwick	RI	02886
(40)) 738-82 BASE DISCORPTION OF THE CHARACTER OF	10	S. STATE OF INCOMPORATION RHODE IS	LAND		8888
Design and aan	inistration of	employee ben	nefit plans and so	ale of insura	unce products
resoeni name Jeffrey A. Brou Treet Address:		· · · · · · · · · · · · · · · · · · ·	STREET ADDRESS	l. Bown	
	ferson Blud		1 € Same		
Warwick	STATE	02886	an	STATE	ZIP C008
Linda J. S	pencer		THEASURER NAME JEFFREY F	1. Brown	
615 Jefferson			1 ← Same		
Warwick	STATE	02886	GIV	STATE	ΣIP COO€
RÈCTOR NAME	9. NAM	ES AND ADDR	ESSES OF THE DI	RECTORS	
REET ADDRESS			STREET ADDRESS		
ÎY	SDUE	ZIP CODE	an	STATE	ZIP COOE
RECTOR NAME			V DIRECTOR NAME		
REET ADORESS		······································	STREET ADDRESS		
IV	STATE	ZIP CGOE	ary	STATE	∐P C ÒO €

AUTHORIZED SHARES ISSUED SHARES MUMBER OF SHARES CLASS / SERIES PAR VALUE NUMBER OF SHARES CLASS / SERCES PAR VALUE 1,000 SHS NO PAR VAL 500 Common

AUTHORIZED

This report must be SIGNED IN INK by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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 hereig are true and correct.

AND ISSUED

Brown

int or Type Name of Officer

President Title of Officer

<u> 2 | 2 | 96 |</u>

File Date:

Check No:

Ву:

For Secretary of State Use Only:

State & Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street . Providence, Rhode Island 02903-1335 401-277-3040

ANNUAL REPORT

Please Type or Print File Annually - Jan. 1 - March 1 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID:	Annual Repo	rt for the year:		
Name of Corporation: Compensation	Planning Associa	tes Incorporated		
Business entity organized under the laws of the State of:R100 For foreign entity, address and telephone number of principal of	fice: [] Busi	Business Entity is (check one): [Business Corporation (See RIGL Chapter 7-1.1) [\chi] Professional Service Corporation (See RIGL Chapter 7-5.1)		
	Brief state	ement of the character of business conduc	ted in Rhode Island:	
Phone: () Address and telephone of the principal office of business entity i Island (Provide street address - Not P.O. Box):		n and administration of employ and sale of insurance productions	jee_berefit ucts	
Phône: (401) 738-8210				
THE	NAMES OF THE OFFICEI	RS ARE:	7IP CODE	
- 00 a a	5 Jefferson Blvd.	Warwick RI	03886 ZIP CODE	
Jeffrey A. Brown 6	15 Jefferson Blvd.	Warwick, RI	09889 MB CODE	
	15 Jefferson Blud.	Warwick RI	0.2886 ZIP CODE	
Jeffrey A. Brown 6	15 Jefferson Blvd.	Warwick, RT	02886	
NAME THE N	STREET ADDRESS	ORS ARE:	ZIP CODE	
NAME	STRPET ADDRESS	CITYNTATE	ZIP CODE	
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE	
NUMBER OF SHARES AUTHORIZED (Rider may be attached)	NUMBER OF	SHARES ISSUED AND OUTSTANDING (F	Rider may be attached)	
Number of Shares Class / Series	Number of S	hares Class / Series	,,	
1,000 Common	5.00	Common		
Date	By Alfred Al Bray	JBw.		
Form 31 1/95	TITLE OF OFFICER SIGNING	fer signing		
DESIGNATED REG	ISTERED AGENT FOR SE	CRVICE OF PROCESS:		
PLEASE NOTE: If the registered office and/or registered age:	nt indicated below is incorrect. For	irm 9 must be filed		

JEFFREY A. BROWN 615 DEFFERSON BLVD. MARWICK RI 02886 FILED

MAR 0 8 1993

Bi Cc 5991

Filing Fee \$50.00 Payable to: Secretary of State

PLEASE TYPE or PRINT

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

File Annualty
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

100 North Main Street Providence. Rhode Island 02903-1335 401-277-3040

		for the year:	199	3 4
Name of Business Entity:		nsation Flar		
Business entity organized under the laws of the State of:		ity is (check one):		
Federal Taxpayer Identification Number:		Business Corporation (See RIGI Chame	.7.1.15
For foreign entity, address and telephone number of princip	(X)+	rofessional Service Co imited Liability Comp	orporation (See RI	GL Chanter 7.5 13
·	Name, title a	nd mailing address of a		
	communicati	ons may be directed:	A	viioiti
		ltrey A <u>. Brown</u>	, President	
Phone: ()		.' // //	<u>nning Associa</u>	stes, Inc.
Address and telephone of the principal office of business en		Jetterson Blva		
results (Provide street address - Not P.O. Box):	l		1886	
615 Jefferson Blud.	Brief statemen	nt of the character of b	usiness conducted	in Rhode Island:
Warwick RI 02886	Lesign &	administration a	d employee be	nefit plans
		ot insurance an	<u>dinsumnoe</u>	products
Phone: (401) 738- 8210	Date of Organ			
Priorie	Date of Qualif	ication to do business	in Rhode Island (i	f foreign entity):
<u> </u>				
CHIEF EXECUTIVE DIFICES ON PRIZIDENT (Cheek Over	RE NAMES OF THE OFFICERS A	RE:		-
Jeffrey A. Brown	INTRILIT ADDRESS	CITYATATE	, 00	ZJP CT)OF
LI CHILL OPERATING OFFICER OR PERCENTAGE PRESIDENT (CHILL ONL)	STREET ADDRESS	Unrwid	1, K.L.	02886 W COOK
JEFFREY A. Brown CUSTODIAN OF RECORDS OR ESECRICITARY (Check One)	US Jefferson Blva.	[Narwic	Y RT	02866
Linda T. Sonnac	U.S Jefferson Blud	CULTATATE	u OT	ZIP CODE
CHIEF FINANCIAL OFFICER OR TREASURE (Check One)	STREET ADDRESS	CTIVATATE	K_K4	02886 ZP CODE
Jetfrey A. Brown	615 Jefferson Blud	Warun	CK RI.	
AME	NAMES OF THE DIRECTORS /	RE:		
AMC	22.1800A TEIRTS	<u></u>		WF COOK
AMF.	AND LYDRACTO	CHYATATE		ALE CODE
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UMBER 1,000 LASS Common ERIES -	NUMBER OF SHA NUMBER 50 CLASS Com SERIES _ PAR VALUE OR	RES ISSUED AND C		
LASS COMMON ERIES AR VALUE OR NO par value	NUMBER OF SHANDER 50 CLASS Come SERIES PAR VALUE OR WITHOUT PAR	RES ISSUED AND C		
LASS Common GRIES AR VALUE OR No par value ITHOUT PAR No par value 11 2/24 19 94	NUMBER OF SHA NUMBER 50 CLASS Com SERIES _ PAR VALUE OR	RES ISSUED AND C		
LASS COMMON ERIES AR VALUE OR NO par value	NUMBER OF SHA NUMBER 56 CLASS COM SERIES _ PAR VALUE OR WITHOUT PAR By:	TRES ISSUED AND CO MOTI NO PAI VALUE WITI		
LASS Common GRIES AR VALUE OR No par value THOUT PAR No par value FILED	NUMBER OF SHA NUMBER 50 CLASS Com SERIES PAR VALUE OR WITHOUT PAR By:	TRES ISSUED AND CO MOTI NO PAI VALUE WITI		
LASS Common GRIES AR VALUE OR No par value ITHOUT PAR No par value 11 2/24 19 94	NUMBER OF SHA NUMBER 56 CLASS COM SERIES _ PAR VALUE OR WITHOUT PAR By:	TRES ISSUED AND CO MOTI NO PAI VALUE WITI		
LASS Common GRIES AR VALUE OR No par value THOUT PAR No par value FILED	NUMBER OF SHA NUMBER 50 CLASS COM SERIES PAR VALUE OR WITHOUT PAR By: Jeffred A Bro PRINT OR TAKE MIGNE PLOSICION 1	TRES ISSUED AND CO MOTI NO PAI VALUE WITI		

JEFFREY A. ERDWN 615 JEFFERSON ELVD WARWICK RI 02866

Form 31 1/85

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

orporate ID	<u> </u>	Annual Report for the year 1993
FIRST: The name	of the corporation is	Compensation Flanning Associates Inco
SECOND: It is inco	orporated under the laws of	Rhode Island
	of business, briefly stated, is insurance and insurance	Design & administration of employee benefit
•		principal office
Fifth: Business a	ddress in Rhode Island	5 Jefferson Blvd., #107
	W	wwick, RI 02886-1357
Sixth: Names and	d addresses of its directors and	d officers: (Attach rider if necessary) Address (including number, street, zip code)
•••••••••••••••••••••••••••••••••••••••	Director	
	Director	
	Director	
Jeffrey A. Brow Teffrey A. Brow	W71 President	538 Midale Pd., East Greenwich, RI 02818
		ent 538 Middle Rd., East Greenwich, R.I. a2818
Linda J. Speni	COV Secretary	106 Elberta St., Warwick, RI 02889
Teffrey A. Brow	WM Treasurer	538 Middle Rd, East Greenwich, RI 0281
SEVENTH: Number	r of Shares authorized:	Par Value
No. of Shares	Class	or statement that shares are without Series par value
1,000	Common	MAR 0 2 1993 No par value
EIGHTH: Number	of Shares issued:	SEC'Y OF STATE Par Value
No. of Shares	Class	or statement that shares are without Series par value
500	Common	No par value
ited	2/24 1993 (Compusation Planning Associates, Inc. (Name of Corporation)
(Report must be	signed by an officer) T	Title Pasident

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Lu 4304

orporate ID	<u> </u>	Annual Report for th	ne year 1932
First: The name	of the corporation is	Compensation (Plánning Associates l
SECOND: It is inco	orporated under the laws of	Rhode Island	
THIRD: Character	r of business, briefly stated, is	dealgin & administration	on of employee
benefit plans & sa	ile of insurance and in	rsurance products	•
	n corporation, address of its p		
FIFTH: Business a	ddress in Rhode Island ω	15 Jefferson Blvd., #	<i>‡107</i>
	<i>u</i>	larwick, R.I. 02886-135	57
SIXTH: Names and	d addresses of its directors and		(Attach rider if necessary)
•••••••••••••••••••••••••••••••••••••••	Director		
	Director		
	Director		
Jeffrey A. Brow		538 Middle Rd., Eas	t Greenwich, R.T. 02818
Jeffrey A Brow		ent 538 Middle Rd., East Gr	•
Linda J. Spence		iolo Elberta St., Warwi	ick, RI 02889
Jeffrey A Brown	UII Treasurer		Greenwich, RI 02818
SEVENTH: Number	r of Shares authorized:	·	Par Value
No. of Shares	Class	Series	or statement that shares are without par value
1,000	Common	PAID	No par value
EіGHTH: Number (of Shares issued:	FEB 1 9 1992	,
		SEC'Y OF STATE	Par Value or statement that shares are without
No. of Shares	Class	Series	par value
<i>5</i> 00	Common		No par value
Pated	ي <u>99 وا 7ال</u> د	Compensation Planning Association	Xiates, Inc
			.
(B	B ₁	3.0	ou
(Report must be	signed by an officer)	title MESICONT	

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Annual Report for the year 1991 Compensation Planning Associates Inc Rhode Island esign and administration of employee benefit
esion and administration of employee beautit
and the second s
e products.
ncipal office
Jefferson Blvd., #107
ick, RI 02886-1357
fficers: (Attach rider if necessary) Address (including number, street, zip code)
538-Middle Rd., East Greenwich, RI 02818
538 Middle Rd., East Greenwich, RI 02818
106 Elberta St., Warwick, RI 02889
538 Middle Rd., East Greenwich, RI 02818
Par Value
or statement that shares are without Series nar value
no par value
Par Value or statement that
Series shares are without par value
no par value
mpensation Planning Associates, Inc.
of Corporation) Of Lyll Prove
President
7 to 1

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 000	4598	Annual Report for the	he year 1990
FIRST: The name			ingAssociatesIncarpora
SECOND: It is inco	orporated under the laws of	Rhode Island	
		design & administration	of amalaura hans for
		nce products	
FOURTH: If foreig	n corporation, address of its	principal office	
FIFTH: Business a	ddress in Rhode Island	615 Jefferson Blvd. #	<i>† 107</i>
		Warwick, RI 02886-	1357
Name	d addresses of its directors an		(Attach rider if necessary)
Jeffrey A. Brow	M Director	538 Middle Rd., East o	Treenwich, RI 02818
	Director		
	Director		
Jeffrey A. Brown	n President	583 Middle Rd., Ea	st Greenwich, RT 02818
Jeffrey A. Brown	? Vice Presid	dent	11 /1
Linda J. Spencer	Secretary	41 Paine Rd. Fost	ter, RI 02825
Jeffrey A. Brown	1Treasurer		ast Greenwich, RT 02818
•	r of Shares authorized:	•	Par Value
No. of Shares	Class	Series	or statement that shares are without par value
1,000	Common	~	no par value
		PAID	/
Eighth: Number	of Shares issued:	NEB VIN 1883	Par Value or statement that
No. of Shares	Class	Sens F STATE	shares are without par value
500	Common	19mo 11	no par value
Dated Febluar	y 23 19 90	Compensation Planning /	4
		By Seffeyl Tion	~
(Report must be	signed by an officer)	Title Bresident	

Form 31 1/85

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

	1	/
Si	Ļ	/
/		

Corporate ID	0004598		Annual Repor	t for the year	1989	
First:	The name of the corpor	ration is		•		
SECOND:	It is incorporated unc	ler the laws of	Rhode Islan	rd		••••••
THIRD:			design & administ			
	and sale of insural		Dea Desducto			
Fourth:	If foreign corporation	, address of its p	orincipal office			
Г І ГТН:	Business address in Rho	de Island	ol5 Jefterson Blvd.,	#107		
***************************************	•••••••••••••••••••••••••••••••••••••••		Varwick, RI 02886-1		***************************************	
_	Names and addresses of	Office		scluding number, sc	(Attach rider if ne	cessary)
Jeffrey A	Brown	Director	538 Middle Rd, E			§
		Director		*************************	••••	*******
	••••••	Director		••••••		******
	Brown		538 Middle Rd,	East Green	nwich, BIO	2818
Jelfrey A.	Braun	Vice Preside	ent 538 Middle Ra,	East Gree	nwich, RI o	0.81.8
Linda J	Spencor	Secretary	41 Paine Rd., Fo			•••••
Jeffrey A	Bawn	Treasurer	538 Middle Rd	•		2281.8.
SEVENTH:	Number of Shares au				Par Value or statement that shares are without	
1,000	Co	<i>ורס</i> וחרון	PAID FEB 1 3 1989		par value 170 par valu	le
EIGHTH:	Number of Shares issue		C'Y. OF STATE		Par Value or statement that shares are without par value	
500	Com	ກາຜາງ	_		no par valu	<u>د</u>
Dated 76	ruary 10 19	9 <i>8.9</i>	Compensation Planni Name of Corporation)	ng Associ	•	
(Repo	ort must be signed by an offi	cer) T	ine President	`	•	

Liling I ce \$15.00

To be filed annually between January 1st and March 1st

State of Mode Island and Frovidence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALI. PROVIDENCE, RHODE ISLAND 02903

Corporate ID = 4598		Annual Rep	ort for the year1988
First: The name of the	ne corporation is	ensation Planning	Associates In
corporated	·		
Second: It is incorpo	rated under the laws of	Rhode Is	land
	ousiness, brielly stated, is		nistration of employee urance products.
	•		
FIFTH: Business addre	ess in Rhode Island 615	Jefferson Bo	leyard, # 107,
	ldresses of its directors and	officers:	(Attach rider if necessary) ss (including number, street, zip code)
Jeffrey A. Brown	Director		Rd., East Greenwich, RI U2818
	Director	······································	
	Director		
Jeffrey A. Brown	President	538 Middle	Rd., East Greenwich, RI
Jeffrey A. Brown	Vice Preside	ent 538 Middle	Rd., East Greenwich, RI 02818
Linda J. Spencer	Secretary	Paine Road.	Foster, RI 02825
Jeffrey A. Brown	Treasurer	538 Middle.	Rd., East Greenwich, RI 02818
Seventii: Number o	f Shares authorized:		Far Value or statement that shares are without
No. of Shares	Class	Series	PAID par value
1,000	COMMOD		no par value
EIGHTH: Number of	Shares issued:		SEC'Y. OF STAPACYalue or statement that
No. of Shares	Class	Series	shares are without par value
500	common	· · · · · · · · · · · · · · · · · · ·	no par value
Dated 2 &	19 .8.8	(Name of Essociation)	Planning Associates, Inc.

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 4598	orporate ID 4598 Annual Report for the year 1987				
FIRST: The name of	of the corporation is Com		ssociates In		
			nd		
			stration of employee		
benefit pl	ans and sale of ins	surance and insura	ance products.		
	dress in Rhode Island 6.15	Jefferson Bouley	ard, # 107,		
	War	wick, RI 02886-	1357		
Name	addresses of its directors and	·	(Attach rider if necessary) uding number, street, zip code)		
Jeffrey A. Brown	Director	538 Middle Rd.	, East Greenwich, RI 02818		
•••••••••••••••••••••••••••••••••••••••	Director		02818		
	Director				
Jeffrey A. Brown	President	538 Middle Rd.,	East Greenwich, RI 02818		
Jeffrey A. Brown	Vice Preside	nt 538 Middle Rd.,	East Greenwich, RI		
Linda J. Spencer			02818 ter, RI 02825		
Jeffrey A, Brown	Treasurer		East Greenwich, RI		
SEVENTH: Number of	of Shares authorized:		02818 Par Value		
No. of Shares	Class	Series	or statement that shares are without		
1,000	common		par value no par value		
_		PAID EB 16 1987 EY. OF STATE Series	no pur varue		
Eighth: Number of	Shares issued: FE	B 10 DU	Par Value or statement		
No. of Shares	Class	Y. OF S Series	shares are with the 1987		
500	common		no par value		
Dated 2/12	(N:	ame of Emporation)	ning Associates, Inc.		
(Pa====	Ву		Jusun		
(Report must be sign	ned by an officer) Tit	de President	•••••••••••••••••••••••••••••••••••••••		

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID. 4598	••••••••••••	Annual Report for	the year 1986
	orporation is Comp	ensation Planning Asso	ciates In
corporated	•••••••••••••••••••••••••••••••••••••••		······································
Second: It is incorporated	d under the laws of	Rhode Island	
THIRD: Character of busin	ess, briefly stated, is	design & administra ance and insurance	ation of employee
			produces.
FIFTH: Business address in	Rhode Island 189	Canal Street, Prov	idence, RI 02903
Name	es of its directors and o		(Attach rider if necessary)
	Director	538 Middle Rd., E	ast Greenwich, RI
Linda J. Spencer	Director	Paine Road, Foste	·
	Director	•	
Jeffrey A. Brown	President	538 Middle Rd., E	ast Greenwich, RI
Jeffrey A. Brown	Vice Presiden		
Linda J. Spencer	Secretary	Paine Road, Foste	
Jeffrey A. Brown	Treasurer	538 Middle Rd., Ea	*************************************
SEVENTH: Number of Share	s authorized:		Par Value
No. of Shares	Class	Series	or statement that shares are without par value
1,000 c	Ommon		no par value
EIGHTH: Number of Shares No of Shares	issued:	FEB 28 1986	Par Value or statement that shares are without par value
500 00	ommon 😅		no par value
Dated 2/11	By	pensation Planning ne of Corporation)	
(Report must be signed by ar	officer) Title	Predident	······

State of Rhode Island and Frovidence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID.	4598		Annual Report	for the year	1985
First:	The name of the	corporation is Co	mpensation Planning As	scciates In	<u> </u>
corporate	ed			*****	
SECOND:	It is incorpora	ited under the laws of	Rhode Islan	ıd	
THIRD:	Character of bu	siness, briefly stated,	is design & admini	stration	of employee
benefit p	lans & sal	e of insurance	and insurance pro	ducts.	
Fourth:	If foreign con	poration, address of it	s principal office		
Г ІГТН:	Business address	in Rhode Island	189 Canal Street,	Providenc	e, RI 02903
Ѕіхтн:	Names and add	resses of its directors		actuding number, stre	(Attach rider if necessary)
Jeffrey A	. Brown	Director	538 Middle Rd.	, East Gr	eenwich, RI
Linda J.	Spencer	Director	Paine Road, Fo	ster, RI	02825
	**************************	Director	***************************************		
Jeffrey A	. Brown	Presiden	t 538 Middle Rd.	, East Gr	eenwich, RI
Jeffrey A	. Brown	Vice Pre	sident 538 Middle Rd.	, East Gr	eenwich, RI
Linda J,	Spencer	Secretar	y Paine Road, Fo	ster, RI	02825
Jeffrey A	. Brown	Treasure	538 Middle Rd.	, East Gr	eenwich, RI
SEVENTH	: Number of S	hares authorized:			Par Value
No. of Sha		Class	Series		or statement that shares are without par value
1,000		common		no	par value
1,000		common.			•
Еіднтн:	Number of Sh	ares issued:			Par Value or statement that
No. of Sha	ıres	Class	Senes		shares are without par value
500)	common		по	par value
Dated	2/25	19 85	Compensation Plan	ining Asso	ociates, Inc.
RECE	ITTO MAK	1985	By effey	& Trou	m
(Rd	port must be signe	d by an officer)	Title Prosident		<u></u>

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

Annual Report for the year

Compensation Planning Associates, FIRST: The name of the corporation is Inc.

It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Design and administration

of employee benefit plans & sale of insurance and insurance products.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

189 Canal Street, Providence, RI 02903

Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Office

Address

Jeffrey A. Brown

Director

538 Middle Rd., East Greewich, RI

Linda J. Spencer

Director

Paine Road, Foster, RI 02825

Director

Jeffrey A. Brown

President

538 Middle Rd., East Greenwich, RI

Jeffrey A. Brown

Vice President 538 Middle Rd., East Greenwich, RI

Linda J. Spencer

Secretary

Paine Road, Foster, RI 02825

Jeffrey A. Brown

Treasurer

538 Middle Road, East Greenwich, RI

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

Class

Series

Par Value or statement that shares are without par value

No. of Shares 1,000

Common

no par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Par Value or statement that shares are without par value

500

Common

no par value

Dated:

PRÉSIDENT

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed, Please contact Corporation Division for information, 277-3040 Filing fee: \$15 00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

Ÿ	. HOD OF THE DEC	REIMIT OF STRIE		
		Annual Report for the year	. 1983	
First: The na	me of the corporation i	S Compensation Plann	ing Associates Inc.	
SECOND: It is	incorporated under the	laws of Rhode Island	d	
THIRD: Charac	eter of business, briefly	stated, is Design and a	dministration of	
employee benefit	plans and the sale o	f insurance and insura	ince products	
Fourth: If fo	oreign corporation, add	lress of its principal office		
FIFTH: Busine	ess address in Rhode Is	land (blank reports will	be mailed to this	
address) 189 Canal	Street, Providence,	RI 02903		
Sixth: Names	and addresses of its of	lirectors and officers:		
(Addre	esses must include street an	d number, if any)		
Name	Office	Addres	s	
Jeffrey A. Brown	Director	538 Middle Road, E	ast Greenwich, RI	
John W. Corbishle	y, Sr. Director	14 Lambie Circle,	Portsmouth, RI	
Linda J. Spencer	Director	Paine Road, Foster	, RI	
Jeffrey A. Brown	President	538 Middle Road, East Greenwich, RI		
John W. Corbishle	ey, Sr. Vice Preside	ent 14 Lambie Circle,	Portsmouth, RI	
Linda J. Spencer	Secretary	Paine Road, Foster, RI		
John W. Corbishle		14 Lambie Circle,	Portsmouth, RI	
SEVENTH: Nu	mber of Shares author	rized:	Par Value or statement that	
No. of Shares	Class	Series	shares are without par value	
1,000	Common		no par value	
Eighth: Num	ber of Shares issued:		Par Value or statement that	
No. of Shares	No. of Shares Class		shares are without par value	
500	common	2	no par value	
Dated: Februa	ry 9 1983	••	ning Associates, Inc	
F	EB 14 1983	Bro- Jeffrey ()	Trour	

If the corporation has changed its registered soffice and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

(Report must be signed by an officer)

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1982

FIRST: The name of the corporation is Compensation Planning Associates.

Incorporated

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Design and administration of employee benefit plans and the sale of insurance and insurance products.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 189 Canal Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name Office Address 538 Middle Road, East Greenwich, RI Jeffrey A. Brown Director 14 Lambie Circle, Portsmouth, RI John W. Corbishley, Sr. Director Paine Road, Foster, RI Linda J. Spencer Director 538 Middle Road, East Greenwich, RI Jeffrey A. Brown President Vice President 14 Lambie Circle, Portsmouth, RI John W. Corbishley, Sr. Paine Road, Foster, RI Linda J. Spencer Secretary 14 Jambie Circle, Portsmouth, RI John W. Corbishley, Sr. Treasurer (If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

Series

Par Value or statement that shares are without par value

1,000

No. of Shares

Common

Class

no par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value or statement that shares are without par value

500

common

ne par value

ა. 82 -_

Dated:

February 16

1982

Compensation Planning Associates, Inc.

By Oresident President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing foe: \$15.00

Brown.

Farm

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

Compensation Planning Associates Incorporated

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Compensation Planning Associates Incorporated.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 189 Canal Street, Providence, RI 02903 and the name of its registered agent in Rhode Island at such address is Jeffrey A.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is N/A

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Design and administration of employee benefit plans and the sale of insurance and insurance products.

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Jeffrey A. Brown	Director	538 Middle Road, East Greenwich, RI
John W. Corbishley, Sr.	Director	14 Lambie Circle, Portsmouth, RI
Linda J. Spencer	Director	Paine Road, Foster, RI
	Director	
	Director	
	Director	
Jeffrey A. Brown	President	538 Middle Road, East Greenwich, RI
John W. Corbishley, Sr.	Vice President	14 Lambie Circle, Portsmouth, RI
Linda J. Spencer	Secretary	Paine Road, Foster, RI
John W Corbishley, Sr.	Treasurer	14 Lambie Circle, Portsmouth, RI

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	<u>Series</u>	Par Value per Share or Statement that Stares are without Par Value
1,000	Common		81 No par value
· 31 11-85	MAR 271	981 SB	····*09···-15.00 5775A14···15.008L

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share

Number of Shares	_Class	<u>Scries</u>	or Statement that Shares are without Par Value
500	common		No par value

Dated February 25 , 19.81

Compensation Planning Associates, Inc.

Rv

. President