

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214552222
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1.) CORPORATION NAME: NEW ENGLAND EMPLOYEE BENEFITS CO., INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: NH	DUE DATE: 10/31/2014 SCC ID NO: F1687419 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>300</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	300
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COMMON	300				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 15 CHENEL DRIVE

CITY/ST/ZIP: CONCORD, NH 03301

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: BRETT D HOUSTON TITLE: PRES OF OPS ADDRESS: 15 CHENELL DRIVE CITY/ST/ZIP/CO: CONCORD, NH 03301	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: MARK E LECOMPTE TITLE: PRES OF SALES ADDRESS: 15 CHENELL DRIVE CITY/ST/ZIP/CO: CONCORD, NH 03301	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: KIM BARRY CURLEY TITLE: DIRECTOR ADDRESS: 15 CHENELL DRIVE CITY/ST/ZIP/CO: CONCORD, NH 03301	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ BRETT D HOUSTON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	BRETT D HOUSTON, PRES OF OPS PRINTED NAME AND CORPORATE TITLE	12/4/2014 DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.