2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 817977

FILED Apr 23, 2009 Secretary of State

Entity Nar	ne: CHUBB&	SON INC					
Current Pi	rincipal Place	of Business:	New Princ	New Principal Place of Business:			
	TAIN VIEW RD NJ 07059						
Current Mailing Address:			New Maili	New Mailing Address:			
	TAIN VIEW RD NJ 07059						
FEI Number:	El Number: 13-5679031 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired ()		
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of N	lew Registered /	Agent:	
1200 S. PIN	ORATION SYST NE ISLAND RO ON, FL 33324						
	named entity so e of Florida.	ubmits this statement for the p	ourpose of changing i	ts registered o	ffice or registered	d agent, or both,	
SIGNATUF	RE:						
	Electroni	Signature of Registered Age	ent		Date		
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	AT () I YORK, REGINA 15 MOUNTAIN V WARREN, NJ 07		Title: Name: Address: City-St-Zip:	AT (X) AMERMAN, JUL 15 MOUNTAIN \ WARREN, NJ (VIEW RD	١	

Title: AT () Delete Title: AT (X) Change () Addition Name: AMERMAN, JULIETTE Address: 15 MOUNTAIN VIEW RD Address: 15 MOUNTAIN VIEW RD City-St-Zip: WARREN, NJ 07059 City-St-Zip: WARREN, NJ 07059

Title: SVP () Delete Title: () Change () Addition Name: GRAHAM, BAXTER Name: Address: 15 MOUNTAIN VIEW RD Address: City-St-Zip: WARREN, NJ 07059 City-St-Zip: WARREN, NJ 07059

Title: Title: () Delete (X) Change () Addition Name: MOTAMED, THOMAS F Name: DEGNAN, JOHN J 15 MOUNTAIN VIEW RD Address: 15 MOUNTAINVIEW RD Address: City-St-Zip: WARREN, NJ 07059 City-St-Zip: WARREN, NJ 07059

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIETTE AMERMAN AT 04/23/2009