

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836238

**FILED
Apr 24, 2013
Secretary of State
CC5519674716**

Entity Name: SUN LIFE AND HEALTH INSURANCE COMPANY (U.S.)

Current Principal Place of Business:

ONE SUN LIFE EXECUTIVE PK
SC 2335
WELLESLEY HILLS, MA 02481

Current Mailing Address:

ONE SUN LIFE EXECUTIVE PK
SC 2335
WELLESLEY HILLS, MA 02481

FEI Number: 06-0893662

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PCD
Name SHUNNEY, MICHAEL E
Address ONE SUN LIFE EXECUTIVE PARK
City-State-Zip: WELLESLEY HILLS MA 02481

Title SENIOR VICE PRESIDENT, CFO,
TREASURER, DIRECTOR
Name GUBBAY, KEITH
Address ONE SUN LIFE EXECUTIVE PARK
City-State-Zip: WELLESLEY HILLS MA 02481

Title D
Name SCHOCH, SUZANNE M
Address ONE SUN LIFE EXECUTIVE PARK
City-State-Zip: WELLESLEY HILLS MA 02481

Title S
Name ANSELLO, KERRI R
Address ONE SUN LIFE EXECUTIVE PARK
City-State-Zip: WELLESLEY HILLS MA 02481

Title SENIOR VICE PRESIDENT, GENERAL
COUNSEL, DIRECTOR
Name DAVIS, SCOTT M
Address ONE SUN LIFE EXECUTIVE PARK
City-State-Zip: WELLESLEY HILLS MA 02481

Title VCIO
Name PEACHER, STEPHEN C
Address ONE SUN LIFE EXECUTIVE PARK
City-State-Zip: WELLESLEY HILLS MA 02481

Title DIRECTOR
Name QUINN, CHRISTOPHER J.
Address ONE SUN LIFE EXECUTIVE PK
City-State-Zip: WELLESLEY HILLS MA 02481

Title VP, CHIEF ACTUARY
Name TAVAN, FRED M.
Address ONE SUN LIFE EXECUTIVE PK
City-State-Zip: WELLESLEY HILLS MA 02481

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I hereby 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 all other like empowered.

SIGNATURE: KERRI R. ANSELLO

SECRETARY

04/24/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name WOODROFFE, SEAN N.
Address ONE SUN LIFE EXECUTIVE PK
City-State-Zip: WELLESLEY HILLS MA 02481