#### 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 836238** 

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

**FILED** Apr 30, 2014 Secretary of State CC0480728883

#### **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 200 E. GAINES STREET 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

Officer/Director Detail:

Title VP, STOP LOSS, AND DIRECTOR Title S

Name BELIVEAU, SCOTT F. Name ANSELLO, KERRI R

Address ONE SUN LIFE EXECUTIVE PARK Address ONE SUN LIFE EXECUTIVE PARK WELLESLEY HILLS MA 02481 City-State-Zip: WELLESLEY HILLS MA 02481 City-State-Zip:

VCIO SENIOR VICE PRESIDENT, GENERAL Title Title

COUNSEL, DIRECTOR Name

PEACHER, STEPHEN C Name DAVIS, SCOTT M

ONE SUN LIFE EXECUTIVE PARK Address Address ONE SUN LIFE EXECUTIVE PARK

City-State-Zip: WELLESLEY HILLS MA 02481 City-State-Zip: WELLESLEY HILLS MA 02481

SVP, DISTRIBUTION, DIRECTOR Title

Title VP, CHIEF ACTUARY Name MULLEN, TERRENCE J.

Name GORHAM, AMY R.

ONE SUN LIFE EXECUTIVE PARK Address Address ONE SUN LIFE EXECUTIVE PK City-State-Zip: WELLESLEY HILLS MA 02481

City-State-Zip: WELLESLEY HILLS MA 02481

SVP, CLIENT AND TECHNOLOGY Title

Name MILANO. EDMUND F. **SERVICES** 

Title

VP, MARKETING

Address ONE SUN LIFE EXECUTIVE PARK Name HEALY, DAVID J.

WELLESLEY HILLS MA 02481 City-State-Zip: Address ONE SUN LIFE EXECUTIVE PARK

WELLESLEY HILLS MA 02481 City-State-Zip: Continues on page 2

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.

04/30/2014 SIGNATURE: KERRI R. ANSELLO SECRETARY

Date

# Officer/Director Detail Continued:

Title PRESIDENT, DIRECTOR
Name KLEIN, ROBERT E. JR.

Address ONE SUN LIFE EXECUTIVE PARK
City-State-Zip: WELLESLEY HILLS MA 02481