2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836238

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

FILED
Mar 08, 2021
Secretary of State
1565241281CC

Current Principal Place of Business:

ONE SUN LIFE EXECUTIVE PK SC 3093

WELLESLEY HILLS, MA 02481

Current Mailing Address:

ONE SUN LIFE EXECUTIVE PK SC 3093

WELLESLEY HILLS, MA 02481 US

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

Date

Officer/Director Detail:

Title PRESIDENT AND CHAIRMAN, Title AVP AND SENIOR COUNSEL AND

DIRECTOR SECRETARY

Name HEALY, DAVID J. Name KALLAS, COLLEEN L.

Address ONE SUN LIFE EXECUTIVE PK Address 2323 GRAND BOULEVARD City-State-Zip: WELLESLEY HILLS MA 02481 City-State-Zip: KANSAS CITY MO 64108

Title SENIOR VICE PRESIDENT, GENERAL Title CHIEF INVESTMENT OFFICER

COUNSEL, DIRECTOR Name BROWN, RANDOLPH B.

Name DAVIS, SCOTT M Address ONE SUN LIFE EXECUTIVE PARK

Address ONE SUN LIFE EXECUTIVE PARK

City-State-Zip: WELLESLEY HILLS MA 02481

Title SVP AND CHIEF ACTUARY Title SVP AND CHIEF INFORMATION OFFICER

AND CHIEF ACTUART OFFICE

NameLILLEY, MEREDITH A.NameBARTGIS, PAULA L.AddressONE SUN LIFE EXECUTIVE PKAddress175 ADDISON ROADCity-State-Zip:WELLESLEY HILLS MA 02481City-State-Zip:WINDSOR CT 06095

Title VP, MARKETING Title SVP, CFO, TREASURER, DIRECTOR

Name MILANO, EDMUND F. Name HAYNES, NEIL L.

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

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

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.

SIGNATURE: COLLEEN L. KALLAS SECRETARY 03/08/2021

Officer/Director Detail Continued:

Title SVP, NATIONAL ACCOUNTS
Name KRZEMINSKI, KEVIN P.

Address ONE SUN LIFE EXECUTIVE PK

SC 1135

City-State-Zip: WELLESLEY HILLS MA 02481

Title VP AND CHIEF RISK OFFICER

Name O'NEILL, JULIA E.

Address ONE SUN LIFE EXECUTIVE PK

SC 1135

City-State-Zip: WELLESLEY HILLS MA 02481

Title VP, HUMAN RESOURCES

Name WORTHAM, TAMMI M.

Address 175 ADDISON ROAD

City-State-Zip: WINDSOR CT 06095

Title INDEPENDENT DIRECTOR

Name KISSEL, COURTNEY

Address 201 TOWNSEND STREET

SUITE 900

City-State-Zip: LANSING MI 48933

Title SVP, STOP LOSS AND HEALTH AND

DIRECTOR

Name COLLIER, JENNIFER E.

Address 175 ADDISON ROAD

City-State-Zip: WINDSOR CT 06095