

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836238

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

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

Title AVP AND SENIOR COUNSEL AND
 SECRETARY
Name KALLAS, COLLEEN L.
Address 2323 GRAND BOULEVARD
City-State-Zip: KANSAS CITY MO 64108

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 VP AND CHIEF ACTUARY
Name LILLEY, MEREDITH A.
Address ONE SUN LIFE EXECUTIVE PK
City-State-Zip: WELLESLEY HILLS MA 02481

Title SVP, CFO, TREASURER, DIRECTOR
Name HAYNES, NEIL L.
Address ONE SUN LIFE EXECUTIVE PARK
City-State-Zip: WELLESLEY HILLS MA 02481

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

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

01/27/2022

Electronic Signature of Signing Officer/Director Detail

Date