

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Monahan  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 FEB - 7 PH 3: 04**

**DOCUMENT # 800038 (2)**  
1. Corporation Name  
**MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY**

Principal Place of Business      Mailing Address  
**1295 STATE STREET  
SPRINGFIELD MASSACHUSETTS 01111**      **1295 STATE STREET  
SPRINGFIELD MASSACHUSETTS 01111**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		25		03/12/1908	04/15/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		04-1590850	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	29	30	<input type="checkbox"/>	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
THE INSURANCE COMMISSIONER CAPITOL BLDG. TALLAHASSEE FL				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City		85 Zip Code	
		FL			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, WILLIAM J	1.2 NAME	See attached Schedule
STREET ADDRESS	1295 STATE ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	SPRINGFIELD MA	1.4 CITY - ST - ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHEELER, THOMAS B.	2.2 NAME	
STREET ADDRESS	1295 STATE ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	SPRINGFIELD MA	2.4 CITY - ST - ZIP	
TITLE	T	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BIXBY, ALLAN B.	3.2 NAME	
STREET ADDRESS	1295 STATE ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	SPRINGFIELD MA	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ACKERMAN, ROGER G	4.2 NAME	
STREET ADDRESS	HOUGHTON PARK; C9-4	4.3 STREET ADDRESS	
CITY - ST - ZIP	CORMING NY	4.4 CITY - ST - ZIP	
TITLE	S	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FINNEGAN, THOMAS J JR	5.2 NAME	
STREET ADDRESS	1295 STATE ST	5.3 STREET ADDRESS	
CITY - ST - ZIP	SPRINGFIELD MA	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ATKINSON, ROBERT B	6.2 NAME	
STREET ADDRESS	1500 MAIN ST	6.3 STREET ADDRESS	
CITY - ST - ZIP	SPRINGFIELD MA	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied was voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report, or in an attached schedule with an address.

SIGNATURE: Thomas J. Finnegan, Jr. 01/31/95 413/744-6052  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR (Date) (Telephone Number)

**Massachusetts Mutual Life Insurance Company**  
**Directors' Mailing Addresses**  
**January 1, 1995**

<b>Roger G. Ackerman</b>	<b>President and Chief Operating Officer</b> <b>Corning, Inc.</b> <b>One Riverfront Plaza</b> <b>HQE 2</b> <b>Corning, NY 14831</b>
<b>Jack F. Bennett</b>	<b>141 Taconic Road</b> <b>Greenwich, Connecticut 06831</b>
<b>William J. Clark</b>	<b>Chairman of the Board</b> <b>Massachusetts Mutual Life Insurance Company</b> <b>1295 State Street</b> <b>Springfield, Massachusetts 01111</b>
<b>Anthony Downs</b>	<b>Senior Fellow</b> <b>The Brookings Institution</b> <b>1775 Massachusetts Avenue, N.W.</b> <b>Washington, DC 20036-2188</b>
<b>James L. Dunlap</b>	<b>Senior Vice President</b> <b>Texaco Inc.</b> <b>2000 Westchester Avenue</b> <b>White Plains, NY 10650</b>
<b>Richard N. Frank</b>	<b>Chairman and Chief Executive Officer</b> <b>Lawry's Restaurants, Inc.</b> <b>2950 Los Felix Boulevard</b> <b>Los Angeles, California 90039</b>
<b>Charles K. Gifford</b>	<b>President</b> <b>Bank of Boston</b> <b>100 Federal Street</b> <b>Boston, Massachusetts 02110</b>
<b>William N. Griggs</b> ✓	<b>Managing Director</b> <b>Griggs &amp; Santow</b> <b>75 Wall Street, 20th Floor</b> <b>New York, New York 10004</b>
<b>James G. Harlow, Jr.</b>	<b>Chairman and President</b> <b>Oklahoma Gas &amp; Electric Company</b> <b>Corporate Tower</b> <b>101 North Robinson</b> <b>Oklahoma City, Oklahoma 73102</b>

**Barbara B. Hauptfuhrer**

1700 Old Welsh Road  
Huntingdon Valley, Pennsylvania 19006

**Sheldon B. Lubar**

Chairman  
Lubar & Co.  
777 East Wisconsin Avenue  
Suite 3380  
Milwaukee, Wisconsin 53202

**William B. Marx, Jr.**

Executive Vice President and  
CEO, Multimedia Products Group  
AT&T  
295 North Maple Avenue, Room 4342L1  
Basking Ridge, NJ 07920

**Donald F. McCullough**

Collins & Aikman Corporation  
210 Madison Avenue  
New York, New York 10016

**Barbara S. Preiskel**

36 West 44th Street  
Suite 1100  
New York, New York 10036

**Thomas B. Wheeler**

President and Chief Executive Officer  
Massachusetts Mutual Life Insurance Co.  
1295 State Street  
Springfield, Massachusetts 01111

**Alfred M. Zeien**

Chairman and Chief Executive Officer  
The Gillette Company  
Prudential Tower  
Boston, Massachusetts 02199