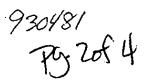
DOCUMENT # 800038  1. Entity Name  MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY  Principal Place of Business  Mailing Address					00	MAY 24 AH 10: 37	141 0: 8000:	75 1al4
					l			
1295 STATE STREET		C/O B040 1295 STATE STREET SPRINGFIELD MA 01111-0001			TAL	ECRETARY OF STATE LAHASSEE, FLORIDA		
2. Principal Place of Business		3. Mailing Address						1 / 10-1
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Applied For			
City & State		City & State		4. FI	04-1590850		Not Applicable	
Zip Country		Zip Caun		3. 0		ertificate of Status Desired	Fee	.75 Additional Required
•	A Surrent Se	reletered Adent			7. N	ame and Address of New Registers	d Age	nt
	6. Name and Address of Current Re	gistered Agont		Name				
THE INSURANCE COMMISSIONER CAPITOL BLDG. TALLAHASSEE FL				Street Addre	ss (P.O. Bo	ox Number is Not Acceptable)		
(ALLAF			City			FL	Zip Code	
8. The above named entity submits this statement for the purpose of changing its regis					d 00:	ant or both in the State of Florida.		
9. This corpora	pnature, typed or printed name of registered agent and attorn is eligible to satisfy its Intangible quirement and elects to do so.		NIII FEE	d Agent signature rec IS \$150.00 will be \$550. epartment of	.00 State	10. Election Campaign Financing Trust Fund Contribution.	ш	\$5.00 May Be Added to Fees
(See criteria	OFFICERS AND D		12		AC	DOITIONS/CHANGES TO OFFICERS	AND D	Change Addition
NAME STREET ADDRESS	D ACKERMAN, ROGER A ONE RIVERFRONT PLAZA CORNING NY	□ Delete	CIT	MEET ADDRESS Y-SI-ZIP	(See I	attached schedule o	of ers)	Change Addition
TITLE NAME STREET ADDRESS	CCEO WHEELER, THOMAS B. 1295 STATE ST SPRINGFIELD MA	☐ Delate	ST	LE MAE REET ADDRESS TY-ST-ZIP		40000327 -06/02/00 ****105,	.00	7947 1021020 ****100.00 □ Change □ Addition
TITLE NAME STREET ADDRESS	D BIRLE, JAMES R 2 GREENWICH PLAZA SUITE 100	Delata.	N/ ST	ile Vame Reet address 174-87-25P				☐ Change ☐ Addition
CITY-S1-ZIP THLE NAME STREET ADDRESS	GREENWICH CT EVP DAVIES, JOHN B 1295 STATE STREET	☐ Delete	N S	TLE AME TREET ADDRESS ITY-ST-ZIP			^	
TITLE HAME	SPRINGFEILD MA 01111 S LOMELI, ANN F 1295 STATE STREET	☐ Delete	S	ITLE IAME TREET ADDRESS			۸.,	Change L Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	SPRINGFEILD MA 01111 T KLINE, EDWARD M	☐ Oelete	T (	TTLE HAME STREET ADDRESS		A	双	Change Addition
STREET ADDRESS CHY-ST-ZIP	1295 STATE STREET SPRINGFEILD MA 01111 Contributes the information supplied with	h this filing does not quali	ify for the c	exemption state	ed in Section	on 119.07(3)(i), Florida Statutes. I furl ne legal effect as if made under oath; lorida Statutes; and that my name ap	her cer	tify that the information im an officer or director in Block 11 or Block 12 if
12 I harehu					. GOT F		I	

800035



## Massachusetts Mutual Life Insurance Company Directors Business Addresses

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Chairman

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Massachusetts Mutual Life Insurance Company

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Alfred M. Zeien

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## MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY Officers Business Address

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Chairman, President and Chief Executive Officer

Lawrence V. Burkett, Jr.

Executive Vice President and General Counsel

Robert W. Crispin

**Executive Vice President** 

James E. Miller

**Executive Vice President** 

Christine M. Modie

Executive Vice President and Chief Information Officer

John V. Murphy

**Executive Vice President** 

Stuart H. Reese

Executive Vice President and Chief Investment Officer

Howard E. Gunton

Senior Vice President and Chief Financial Officer

Ann F. Lomeli

Senior Vice President, Secretary and Deputy General

Counsel

Edward M. Kline

Vice President and Treasurer

The business address for all of the above is:

1295 State Street

Springfield, MA 01111