
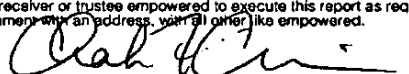


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
4 Jun 01, 2006 8:00 am
Secretary of State

04-27-2006 90411 001 ***600.00

DOCUMENT # P35235					
1. Entity Name ALLMERICA FINANCIAL BENEFIT INSURANCE COMPANY					
Principal Place of Business 440 LINCOLN STREET WORCESTER, MA 01653		Mailing Address 440 LINCOLN STREET WORCESTER, MA 01653			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 23-2643430	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PARRY III, EDWARD J	NAME			
STREET ADDRESS	440 LINCOLN ST	STREET ADDRESS			
CITY-ST-ZIP	WORCESTER, MA 01605	CITY-ST-ZIP			
TITLE	VT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MCGIVNEY, MARK C	NAME			
STREET ADDRESS	440 LINCOLN ST	STREET ADDRESS			
CITY-ST-ZIP	WORCESTER, MA 01605	CITY-ST-ZIP			
TITLE	DV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HUBER, KENDALL J	NAME			
STREET ADDRESS	440 LINCOLN ST	STREET ADDRESS			
CITY-ST-ZIP	WORCESTER, MA 01605	CITY-ST-ZIP			
TITLE	DV <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	KAVANAUGH, JOHN P	NAME			
STREET ADDRESS	440 LINCOLN ST	STREET ADDRESS			
CITY-ST-ZIP	WORCESTER, MA 01605	CITY-ST-ZIP			
TITLE	DV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	TRANter, GREGORY D	NAME			
STREET ADDRESS	440 LINCOLN ST	STREET ADDRESS			
CITY-ST-ZIP	WORCESTER, MA 01605	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			4/6/06 (508)855-2319		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

65017070



03162006 Chg-P CR2E034 (11/05)

4. FEI Number **23-2643430** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



FL

Zip Code

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/06

(508)855-2319

Date

Daytime Phone #

ATTACHMENT

66017678
~~#P35235~~

2006 UNIFORM BUSINESS REPORT
DOCUMENT # P35235
Allmerica Financial Benefit Insurance Company

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: DV NAME: James S. Hyatt STREET ADDRESS: 440 Lincoln Street CITY-ST-ZIP: Worcester, MA 01605	ADDITION
TITLE: DV NAME: Susan S. Korthase STREET ADDRESS: 440 Lincoln Street CITY-ST-ZIP: Worcester, MA 01605	ADDITION
TITLE: V NAME: John E. Brabazon STREET ADDRESS: 440 Lincoln Street CITY-ST-ZIP: Worcester, MA 01605	DELETE
TITLE: S NAME: Charles F. Cronin STREET ADDRESS: 440 Lincoln Street CITY-ST-ZIP: Worcester, MA 01605	
TITLE: D NAME: Michael K. Britt STREET ADDRESS: 440 Lincoln Street CITY-ST-ZIP: Worcester, MA 01605	ADDITION
TITLE: C NAME: Frederick H. Eppinger STREET ADDRESS: 440 Lincoln Street CITY-ST-ZIP: Worcester, MA 01605	
TITLE: DV NAME: David J. Firstenburg STREET ADDRESS: 440 Lincoln Street CITY-ST-ZIP: Worcester, MA 01605	
TITLE: D NAME: Bonnie K. Haase STREET ADDRESS: 440 Lincoln Street CITY-ST-ZIP: Worcester, MA 01605	DELETE
TITLE: DV NAME: Cynthia H. Young STREET ADDRESS: 440 Lincoln Street CITY-ST-ZIP: Worcester, MA 01605	DELETE
TITLE: DP NAME: Marita Zuraitis STREET ADDRESS: 440 Lincoln Street CITY-ST-ZIP: Worcester, MA 01605	

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Officers and Directors

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#P 35235

Allmerica Financial Benefit Insurance Company

<u>Director</u>	<u>Title</u>	<u>Start Date</u>
Frederick H. Eppinger	Chairman of the Board	08/28/2003
David J. Firstenberg	Director	03/31/2004
J. Kendall Huber	Director	03/31/2000
James S. Hyatt	Director	09/07/2005
Paul J. Mueller	Director	03/20/2006
Edward J. Parry III	Director	11/20/1996
Gregory D. Tranter	Director	10/13/2000
Marita Zuraitis	Director	05/10/2004

<u>Officer</u>	<u>Title</u>	<u>Start Date</u>
Gary S. Bujaucius	Valuation Actuary	10/02/1997
William J. Cahill Jr.	Group Counsel	06/06/2002
Edward J. Parry III	Vice Chair	04/20/2004
Marita Zuraitis	Vice Chair	04/20/2004
Warren E. Barnes	Vice President	12/22/2004
	Corporate Controller	12/22/2004
Mark D. Brissman	Vice President	06/22/2004
	Chief Actuary	06/22/2004
William J. Cahill Jr.	Assistant Secretary	06/01/2000
	Vice President	02/20/2003
Paul F. Carleo	Assistant Vice President	06/05/2003
Michael R. Christiansen	Vice President	08/10/2005
James E. Connor	Vice President	12/31/2003
Alan K. Crater	Vice President	08/11/2004
Charles F. Cronin	Secretary	06/01/2000
Kathleen T. Cunningham	Assistant Vice President	03/20/2006
Lee D. Davidson	Assistant Vice President	08/07/1997
Gary A. DelBuono	Vice President	12/05/2002
Douglas T. Eden	Vice President	03/20/2006
David J. Firstenberg	Vice President	02/22/2002
Joseph D. Freitas	Vice President	06/22/2005
Robert K. Grennan	Assistant Vice President	03/20/2006
J. Kendall Huber	General Counsel	03/31/2000
	Senior Vice President	04/20/2004
	Assistant Secretary	06/06/2002
James S. Hyatt	Vice President	08/11/2004
Edward P. Krause	Assistant Treasurer	01/25/2006
John R. Larson	Assistant Treasurer	02/24/2005
Richard W. Lavey	Vice President	01/12/2004
Patricia L. Linton	Vice President	03/01/1999
Richard John Litchfield	Assistant Vice President	04/03/2003
Mark C. McGivney	Vice President	03/31/2000
	Treasurer	03/31/2000
Patricia A. Norton-Gatto	Vice President	12/31/2003
Edward J. Parry III	Assistant Treasurer	03/31/2000
	Chief Financial Officer	12/12/1996
Benjamin R. Rhodes	Vice President	12/31/2003
Edward C. Ruhl	Vice President	03/01/1999
David D. Sagaser	Vice President	04/02/2002
Angela Y. Smith	Vice President	12/31/2003
Michael J. Smith	Vice President	06/22/2004

Address for all - 440 Lincoln Street
Worcester MA 01605

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Officers and Directors

#P35235

Gregory D. Tranter	Chief Information Officer	
	Vice President	06/08/2001
Eric M. Trigilio	Assistant Vice President	08/03/1998
Ann K. Tripp	Chief Investment Officer	09/19/2003
Richard Van Steenburgh	Vice President	03/20/2006
Douglas Warner	Assistant Vice President	06/02/1999
Charles T. Wells	Assistant Vice President	12/05/2002
Marita Zuraitis	President	06/02/1999
	Chief Operating Officer	03/20/2006
	President	04/20/2004
		11/15/2004

Address for all: 440 Lincoln Street
Worcester MA 01605



ATTACHMENT

6607678

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 9, 2006

ALLMERICA FINANCIAL BENEFIT INSURANCE COMPANY
440 LINCOLN STREET
WORCESTER, MA 01653

Subject: ALLMERICA FINANCIAL BENEFIT INSURANCE COMPANY

Reference Number:

P35235

Please be advised, we have received your annual report/uniform business report and check(s) totaling \$600.00 of which \$150.00 has been designated to file this report. However, the enclosed annual report/uniform business report has not been filed and a copy is being returned to you for the following correction(s):

List the street address of each officer/director listed on the report or on an attachment.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JE

ANNUAL REPORTS SECTION

*5/26 spoke with State -
Add address on attachments
and resubmit*