

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90017 004 ***150.00

UCR1/4/30 A1

DOCUMENT # P97000014967

1. Entity Name
ALLMERICA BENEFITS, INC.

Principal Place of Business 440 LINCOLN STREET WORECTER MA 01653	Mailing Address 440 LINCOLN STREET WORECTER MA 01653
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2296913	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**HENDERSON, THOMAS N III
 101 EAST KENNEDY BLVD.
 SUITE 3700
 TAMPA FL 33602**

7. Name and Address of New Registered Agent

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLANCHARD, LAWRENCE E 97 BIRCHWOOD DRIVE HOLDEN MA 01520	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DAVIDSON, LEE D 420 TEMPLETON ROAD ATHOL MA 01331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CRONIN, CHARLES 57 LONGWOOD DRIVE LUNENBURG MA 01462	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ERICKSON, LEE W 455 QUINAPOXET STREET HOLDEN MA 01520	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NUNLEY, K. DAVID 1 YANKEE LANE ASHLAND MA 01721	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ARMSTRONG, ABIGAIL 274 BROCKELMAN ROAD LANCASTER MA 01523	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *LEE W ERICKSON* **ERICKSON** 02/13/2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

04/26/2001

Officers and Directors

Attachment

Doc# PG700004967
604147

Allmerica Benefits, Inc.

Director

Lawrence E. Blanchard
Lee D. Davidson

Title

Director
Director

Start Date

02/14/1997
02/14/1997

Officer

Abigail M. Armstrong
Lawrence E. Blanchard
Charles F. Cronin
Lee D. Davidson
Lee W. Erickson
Joseph W. MacDougall Jr.
K. David Nunley
Martin A. Snow

Title

Assistant Secretary
President
Secretary
Vice President
Treasurer
Assistant Secretary
Vice President
Assistant Treasurer

Start Date

04/26/1999
02/14/1997
06/01/2000
02/14/1997
09/14/1998
02/14/1997
10/13/2000
08/31/1999