



**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 02, 2004 8:00 am**  
**Secretary of State**

04-02-2004 90061 045 \*\*\*150.00

<b>DOCUMENT # P97000014967</b>					
1. Entity Name ALLMERICA BENEFITS, INC.					
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			
Zip	Country	Zip	Country	4. FEI Number 59-2296913	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		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	P	<input type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LITIZIA, BRUCE A		NAME	Letizia, Bruce A	Typo
STREET ADDRESS	440 LINCOLN ST		STREET ADDRESS		
CITY-ST-ZIP	WORCESTER, MA 01653		CITY-ST-ZIP		
TITLE	DV	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIDSON, LEE D		NAME		
STREET ADDRESS	420 TEMPLETON ROAD		STREET ADDRESS		
CITY-ST-ZIP	ATHOL, MA 01331		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRONIN, CHARLES		NAME		
STREET ADDRESS	57 LONGWOOD DRIVE		STREET ADDRESS		
CITY-ST-ZIP	LUNENBURG, MA 01462		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	T	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCQUNEY, MARK C		NAME	McGivney, Mark C	Typo
STREET ADDRESS	440 LINCOLN ST		STREET ADDRESS		
CITY-ST-ZIP	WORCESTER, MA 01653		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NUNLEY, K. DAVID		NAME		
STREET ADDRESS	1 YANKEE LANE		STREET ADDRESS		
CITY-ST-ZIP	ASHLAND, MA 01721		CITY-ST-ZIP		
TITLE	AT	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANCHESTER, LORI A		NAME		
STREET ADDRESS	440 LINCOLN ST		STREET ADDRESS		
CITY-ST-ZIP	WORCESTER, MA 01653		CITY-ST-ZIP		
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Date: 3-29-04		Daytime Phone #: 508-855-1000
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

Attachment 24093228  
#197000014967

**Officers and Directors**

**Allmerica Benefits, Inc.**

<u>Director</u>	<u>Title</u>	<u>Start Date</u>
Lee D. Davidson	Director	02/14/1997
Bruce A. Letizia	Director	11/29/2001

<u>Officer</u>	<u>Title</u>	<u>Start Date</u>
William J. Cahill Jr.	Assistant Secretary	03/29/2002
Charles F. Cronin	Secretary	06/01/2000
Lee D. Davidson	Vice President	02/14/1997
Franklin D. Figueiredo	Assistant Vice President	11/30/2001
Bruce A. Letizia	President	01/21/2002
Michael D. Lorion	Assistant Treasurer	09/19/2003
Lori A. Manchester	Assistant Treasurer	03/29/2002
Mark C. McGivney	Treasurer	03/29/2002
K. David Nunley	Vice President	10/13/2000
Steven L. Nyberg	Vice President	03/29/2002
Macarthur Starks, Jr.	Assistant Vice President	03/29/2002