2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 800038

Entity Name: MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY

Current Principal Place of Business:

1295 STATE STREET SPRINGFIELD, MA 01111

Current Mailing Address:

1295 STATE STREET MIP B370 SPRINGFIELD, MA 01111-0001

FEI Number: 04-1590850

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST. TALLAHASSEE, FL 32399 US

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:

Address

City-State-Zip:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PCEO	Title	EVP
Name	CRANDALL, ROGER W	Name	ROELLIG, MARK
Address	1295 STATE STREET	Address	1295 STATE STREET
City-State-Zip:	SPRINGFIELD MA 01111	City-State-Zip:	SPRINGFIELD MA 01111
Title	S	Title	EVP
Name	FLANAGAN, PIA	Name	FANNING, MICHAEL R
Address	1295 STATE STREET	Address	1295 STATE STREET
City-State-Zip:	SPRINGFIELD MA 01111	City-State-Zip:	SPRINGFIELD MA 01111
Title	EVP & CIO	Title	EVP
Name	CORBETT, M. TIMOTHY	Name	AHMED, ADNAN O
Address	1295 STATE STREET	Address	1295 STATE STREET
City-State-Zip:	SPRINGFIELD MA 01111	City-State-Zip:	SPRINGFIELD MA 01111
Title	EVP, CHIEF FINANCIAL OFFICER AND CHIEF ACTUARY		
Name	WARD, ELIZABETH		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PIA FLANAGAN

1295 STATE STREET

SPRINGFIELD MA 01111

CORPORATE SECRETARY

04/20/2018

Date

FILED Apr 20, 2018 Secretary of State CC6763053215

Certificate of Status Desired: Yes