

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 800583

**FILED**  
**Mar 23, 2015**  
**Secretary of State**  
**CC5252529091**

**Entity Name:** THE PHOENIX INSURANCE COMPANY.

**Current Principal Place of Business:**

ONE TOWER SQUARE  
HARTFORD, CT 06183

**Current Mailing Address:**

ONE TOWER SQUARE  
HARTFORD, CT 06183 US

**FEI Number: 06-0303275**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
200 E. GAINES STREET  
TALLAHASSEE, FL 32399-0000 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DIRECTOR, PRESIDENT, CHAIRMAN,  
                  CEO  
Name           MACLEAN, BRIAN W  
Address        ONE TOWER SQUARE  
City-State-Zip: HARTFORD CT 06183

Title           DIRECTOR, VC, CFO  
Name           BENET, JAY S  
Address        ONE TOWER SQUARE  
City-State-Zip: HARTFORD CT 01683

Title           DIRECTOR, VC, CHIEF INVESTMENT  
                  OFFICER  
Name           HEYMAN, WILLIAM H  
Address        485 LEXINGTON AVENUE, SUITE 400  
City-State-Zip: NEW YORK NY 10017-2630

Title           ASSISTANT CORPORATE  
                  SECRETARY  
Name           MULCAHY, ANN B.  
Address        ONE TOWER SQUARE  
City-State-Zip: HARTFORD CT 06183

Title           CORPORATE SECRETARY  
Name           SKJERVEN, WENDY C  
Address        385 WASHINGTON STREET  
City-State-Zip: ST. PAUL MN 55102

Title           TREASURER, EXECUTIVE VICE  
                  PRESIDENT  
Name           OLIVO, MARIA  
Address        485 LEXINGTON AVENUE, SUITE 400  
City-State-Zip: NEW YORK NY 10017-2630

Title           DIRECTOR, VC, OFFICER  
Name           SPADORCIA, DOREEN  
Address        ONE TOWER SQUARE  
City-State-Zip: HARTFORD CT 06183

Title           DIRECTOR, EXECUTIVE VICE  
                  PRESIDENT, GENERAL COUNSEL  
Name           SPENCE, KENNETH F. III  
Address        385 WASHINGTON STREET  
City-State-Zip: ST. PAUL MN 55102

**Continues on page 2**

*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: ANN B. MULCAHY**

**ASSISTANT CORPORATE   03/23/2015**  
**SECRETARY**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           TOCZYDLOWSKI, GREGORY C.  
Address        ONE TOWER SQUARE  
City-State-Zip: HARTFORD CT 06183