#### 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 836238** 

Entity Name: SUN LIFE AND HEALTH INSURANCE COMPANY (U.S.)

**FILED** Apr 28, 2015 Secretary of State CC2346254827

## **Current Principal Place of Business:**

ONE SUN LIFE EXECUTIVE PK SC 2335

WELLESLEY HILLS, MA 02481

#### **Current Mailing Address:**

ONE SUN LIFE EXECUTIVE PK SC 2335

WELLESLEY HILLS, MA 02481

FEI Number: 06-0893662 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:

PRESIDENT AND CHAIRMAN, Title Title SECRETARY

DIRECTOR Name ANSELLO, KERRI R

Name BELIVEAU, SCOTT F. Address ONE SUN LIFE EXECUTIVE PARK Address ONE SUN LIFE EXECUTIVE PARK

WELLESLEY HILLS MA 02481 City-State-Zip:

City-State-Zip: WELLESLEY HILLS MA 02481

Title SVP, CIO Title SENIOR VICE PRESIDENT, GENERAL

Name PEACHER, STEPHEN C COUNSEL, DIRECTOR

ONE SUN LIFE EXECUTIVE PARK Name DAVIS, SCOTT M Address City-State-Zip: WELLESLEY HILLS MA 02481

Address ONE SUN LIFE EXECUTIVE PARK

WELLESLEY HILLS MA 02481 City-State-Zip: SVP, CLIENT AND TECHNOLOGY Title

SERVICES, DIRECTOR Title VP, CHIEF ACTUARY Name HEALY, DAVID J.

Name GORHAM, AMY R. ONE SUN LIFE EXECUTIVE PARK Address Address ONE SUN LIFE EXECUTIVE PK

City-State-Zip: WELLESLEY HILLS MA 02481

City-State-Zip: WELLESLEY HILLS MA 02481

Title SVP, CFO, TREASURER, DIRECTOR Title VP, MARKETING

Name HAYNES, NEIL L. Name MILANO, EDMUND F.

Address ONE SUN LIFE EXECUTIVE PARK

Address ONE SUN LIFE EXECUTIVE PARK City-State-Zip: WELLESLEY HILLS MA 02481

WELLESLEY HILLS MA 02481 City-State-Zip:

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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.

04/28/2015 SIGNATURE: KERRI R. ANSELLO SECRETARY

# Officer/Director Detail Continued:

Title SVP, US DISTRIBUTION
Name KRZEMINSKI, KEVIN

Address ONE SUN LIFE EXECUTIVE PK

SC 2335

City-State-Zip: WELLESLEY HILLS MA 02481

Title VP, HUMAN RESOURCES

Name SCHUR, EMILY B.

Address ONE SUN LIFE EXECUTIVE PK

SC 2335

City-State-Zip: WELLESLEY HILLS MA 02481

Title VP, STOP LOSS
Name NIELAND, BRAD N.

Address ONE SUN LIFE EXECUTIVE PK

SC 2335

City-State-Zip: WELLESLEY HILLS MA 02481