#### **2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 844998** 

Entity Name: WAUSAU UNDERWRITERS INSURANCE COMPANY

FILED
May 01, 2019
Secretary of State
7544785835CC

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

2000 WESTWOOD DRIVE WAUSAU. WI 54402-5017

## **Current Mailing Address:**

175 BERKELEY ST BOSTON. MA 02116

FEI Number: 39-1341459 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST 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	PRESIDENT, DIRECTOR	Title	Т

NameMACPHEE, JAMES MNameYAHIA, LAURANCE HAddress175 BERKLEY ST.Address175 BERKELEY STCity-State-Zip:BOSTON MA 02116City-State-Zip:BOSTON MA 02116

Title DIRECTOR, SECRETARY Title DIRECTOR

NameTOUHEY, MARK CNameDOLAN, MATTHEW PAddress175 BERKELEY ST.Address175 BERKELEY ST.City-State-Zip:BOSTON MA 02116City-State-Zip:BOSTON MA 02116

Title DIRECTOR Title DIRECTOR

NameERBIG, ALISON BNameFALLON, MICHAEL JAddress175 BERKELEY STREETAddress175 BERKELEY STREET

City-State-Zip: BOSTON MA 02116 City-State-Zip: BOSTON MA 02116

Title DIRECTOR Title DIRECTOR

Name MORAHAN, ELIZABETH J Name HAASE, JULIE M

Address 175 BERKELEY STREET Address 175 BERKELEY STREET

City-State-Zip: BOSTON MA 02116

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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.

SIGNATURE: MARK C. TOUHEY SECRETARY 05/01/2019

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name MCSWEENEY, SEAN B Name ROBINSON, FRANCIS W

Address 175 BERKELEY ST Address 175 BERKELEY ST

City-State-Zip: BOSTON MA 02116 City-State-Zip: BOSTON MA 02116