

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844998

Entity Name: WAUSAU UNDERWRITERS INSURANCE COMPANY**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
Name MIRZA, HAMID T
Address 175 BERKLEY ST.
City-State-Zip: BOSTON MA 02116

Title T
Name VASILAKOS, NIK
Address 175 BERKELEY ST
City-State-Zip: BOSTON MA 02116

Title DIRECTOR, SECRETARY
Name TOUHEY, MARK C
Address 175 BERKELEY ST.
City-State-Zip: BOSTON MA 02116

Title DIRECTOR
Name DOLAN, MATTHEW P
Address 175 BERKELEY ST.
City-State-Zip: BOSTON MA 02116

Title DIRECTOR
Name ERBIG, ALISON B
Address 175 BERKELEY STREET
City-State-Zip: BOSTON MA 02116

Title DIRECTOR
Name FALLON, MICHAEL J
Address 175 BERKELEY STREET
City-State-Zip: BOSTON MA 02116

Title DIRECTOR
Name MORAHAN, ELIZABETH J
Address 175 BERKELEY STREET
City-State-Zip: BOSTON MA 02116

Title DIRECTOR
Name CZAPLA, JAMES M
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****04/27/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	PENA, EDWARD J	Name	SANGHERA, PAUL
Address	175 BERKELEY ST	Address	175 BERKELEY ST
City-State-Zip:	BOSTON MA 02116	City-State-Zip:	BOSTON MA 02116