

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 846539

**Entity Name:** HERITAGE UNION LIFE INSURANCE COMPANY

**Current Principal Place of Business:**

187 DANBURY RD  
RIVERVIEW BLDG 3RD FLOOR  
WILTON, CT 06897

**Current Mailing Address:**

187 DANBURY RD  
RIVERVIEW BLDG 3RD FLOOR  
WILTON, CT 06897 US

**FEI Number:** 41-0880965

**Certificate of Status Desired:** No

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

CORPORATION, CT  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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:** CT CORPORATION

01/16/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name STROUP, CHRIS C  
Address 187 DANBURY RD RIVERVIEW BLDG  
3RD FL  
City-State-Zip: WILTON CT 06897

Title P  
Name ECKERT, RAYMOND A  
Address 187 DANBURY RD RIVERVIEW BLDG  
3RD FL  
City-State-Zip: WILTON CT 06897

Title CFO  
Name FLEITZ, MICHAEL E  
Address 187 DANBURY RD RIVERVIEW BLDG  
3RD FL  
City-State-Zip: WILTON CT 06897

Title S  
Name SARLITTO, MARK R  
Address 187 DANBURY RD RIVERVIEW BLDG  
3RD FL  
City-State-Zip: WILTON CT 06897

Title COO  
Name TREGLIA, ENRICO J  
Address 187 DANBURY RD RIVERVIEW BLDG  
3RD FL  
City-State-Zip: WILTON CT 06897

Title AVP  
Name SONDAY, RICHARD D  
Address 187 DANBURY RD RIVERVIEW BLDG  
3RD FL  
City-State-Zip: WILTON CT 06897

*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:** RICHARD SONDAY

AVP

01/16/2014

Electronic Signature of Signing Officer/Director Detail

Date