## 2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 846539** 

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

FILED
Jan 23, 2013
Secretary of State
CC2322613584

## **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 P O BOX 6200 (32314-6200) 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: CT CORPORATION 01/23/2013

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CEO Title P

Name STROUP, CHRIS C Name ECKERT, RAYMOND A

Address 187 DANBURY RD RIVERVIEW BLDG Address 187 DANBURY RD RIVERVIEW BLDG

3RD FL 3RD FL

City-State-Zip: WILTON CT 06897 City-State-Zip: WILTON CT 06897

Title CFO Title S

Name FLEITZ, MICHAEL E Name SARLITTO, MARK R

Address 187 DANBURY RD RIVERVIEW BLDG Address 187 DANBURY RD RIVERVIEW BLDG

3RD FL 3RD FL

City-State-Zip: WILTON CT 06897 City-State-Zip: WILTON CT 06897

Title COO Title AVP

Name TREGLIA, ENRICO J Name SONDAY, RICHARD D

Address 187 DANBURY RD RIVERVIEW BLDG Address 187 DANBURY RD RIVERVIEW BLDG

3RD FL 3RD FL

City-State-Zip: WILTON CT 06897 City-State-Zip: WILTON CT 06897

Electronic Signature of Signing Officer/Director Detail

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.