2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 850360

Entity Name: C. M. LIFE INSURANCE COMPANY

Current Principal Place of Business:

100 BRIGHT MEADOW BLVD. ENFIELD. CT 06082-1981

Current Mailing Address:

1295 STATE ST MIP B370 SPRINGFIELD, MA 01111-0001

FEI Number: 06-1041383 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES STREET PO 6200 TALLAHASSEE, FL 32399 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

FILED Feb 16, 2021

Secretary of State

7462420519CC

Officer/Director Detail:

Title P&CE Title S

NameCRANDALL, ROGER WNameAKINBAJO, TOKUNBOAddress1295 STATE STREETAddress1295 STATE STREETCity-State-Zip:SPRINGFIELD MA 01111City-State-Zip:SPRINGFIELD MA 01111

Title EVP AND CHIEF FINANCIAL OFFICER Title EXECUTIVE VICE PRESIDENT

Name WARD, ELIZABETH A Name FANNING, MICHAEL R

Address 1295 STATE ST Address 1295 STATE ST

City-State-Zip: SPRINGFIELD MA 01111-0001 City-State-Zip: SPRINGFIELD MA 01111-0001

Title EXECUTIVE VICE PRESIDENT
Name CORBETT, MELVIN TIMOTHY

Address 1295 STATE ST

City-State-Zip: SPRINGFIELD MA 01111-0001

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: TOKUNBO AKINBAJO

SECRETARY

02/16/2021