

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 850735

Entity Name: HCC LIFE INSURANCE COMPANY

Current Principal Place of Business:

225 TOWNPARK DRIVE
SUITE 350
KENNESAW, GA 30144

FILED
May 01, 2015
Secretary of State
CC5743923318

Current Mailing Address:

13403 NORTHWEST FREEWAY
ATTN: D. GREEN - LEGAL DEPT.
HOUSTON, TX 77040

FEI Number: 35-1817054

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 EAST GAINES STREET
ATTN: SERVICE OF PROCESS SECTION
TALLAHASSEE, FL 32399-4201 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 DP
Name STRUSZ, DANIEL A.
Address 225 TOWNPARK DRIVE,
SUITE 350
City-State-Zip: KENNESAW GA 30144

Title VCFO, DIRECTOR
Name SANDERFORD, MARK R
Address 225 TOWNPARK DRIVE, STE 350
City-State-Zip: KENNESAW GA 30144

Title DV
Name WILLIAMS, CHRISTOPHER J
Address 13403 NORTHWEST FREEWAY
City-State-Zip: HOUSTON TX 77040

Title VP, ASST. SECRETARY
Name RINICELLA, RANDY D
Address 13403 NORTHWEST FREEWAY
City-State-Zip: HOUSTON TX 77040

Title VT
Name LEE, JONATHAN
Address 13403 NORTHWEST FREEWAY
City-State-Zip: HOUSTON TX 77040

Title SECRETARY
Name LUDLOW, ALEXANDER
Address 13403 NORTHWEST FREEWAY
City-State-Zip: HOUSTON TX 77040

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: ALEXANDER LUDLOW

SECRETARY

05/01/2015

Electronic Signature of Signing Officer/Director Detail Date