

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 803764

FILED
Jan 07, 2009
Secretary of State

Entity Name: THE PAUL REVERE LIFE INSURANCE COMPANY

Current Principal Place of Business:

18 CHESTNUT STREET
WORCESTER, MA 01608

New Principal Place of Business:

Current Mailing Address:

ONE FOUNTAIN SQUARE
CHATTANOOGA, TN 37402

New Mailing Address:

FEI Number: 04-1768571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPCS () Delete
Name: ROTH, SUSAN NANCE
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

Title: DEVP () Delete
Name: MCCARTHY, KEVIN P
Address: 2211 CONGRESS STREET
City-St-Zip: PORTLAND, ME 04122

Title: DPCE () Delete
Name: WATJEN, THOMAS R
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

Title: DEVP () Delete
Name: GREVING, ROBERT C
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

Title: EVP () Delete
Name: GLICK, CHARLES L
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

Title: EVO () Delete
Name: BEST, ROBERT O
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPCS (X) Change () Addition
Name: ROTH, SUSAN N
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DEVP (X) Change () Addition
Name: BEST, ROBERT O
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

Title: VPT (X) Change () Addition
Name: MCMAHON, KEVIN A
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SUSAN N. ROTH

VPCS

01/07/2009

Electronic Signature of Signing Officer or Director

Date