2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#812292

Entity Name: UNION SECURITY INSURANCE COMPANY

FILED Apr 13, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

2323 GRAND BOULEVARD KANSAS CITY, MO 641082670 US

Current Mailing Address: New Mailing Address:

PO BOX 419052 KANSAS CITY, MO 641416052 US

FEI Number: 81-0170040 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

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

OFFICERS AND DIRECTORS:

Title: PD

Name: ROBERTS, JOHN S Address: 2323 GRAND BLVD

City-St-Zip: KANSAS CITY, MO 641082670 US

Title: VS

Name: BOWEN, KENNETH D Address: 2323 GRAND BLVD

City-St-Zip: KANSAS CITY, MO 641082670 US

Title: D

Name: PENINGER, MICHAEL J
Address: ONE CHASE MANHATTAN PLAZA
City-St-Zip: NEW YORK, NY 10005 US

Title: VT

Name: YAKRE, MILES B

Address: 2323 GRAND BOULEVARD
City-St-Zip: KANSAS CITY, MO 641082670 US

Title:

Name: PAGANO, CHRISTOPHER J
Address: ONE CHASE MANHATTAN PLAZA
City-St-Zip: NEW YORK, NY 10005 US

Title:

Name: LEMASTERS, S. CRAIG

Address: 260 INTERSTATE CIRCLE NORTH SE

City-St-Zip: ATLANTA, GA 30339 US

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: KENNETH D BOWEN VS 04/13/2012