FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 823356

(1)

CHUBB SOVEREIGN LIFE INSURANCE COMPANY									
Principal Place 25 WEST ANAP SANTA BARBAN	PAMU STREET		Mailing Address ONE GRANITE PLACE CONCORD NH 03301-3258						
						3. Date Incorporated or Qualified 10/07/1969	3s. Date of Last F 09/24/1996	Report	
2. Principal Pl	ace of Business	28. Mailing Address				4. FEI Number		pplied For	
	One Granite Place 26					95-2243251	Not Applicable		
Suite, Apt 4	#, etc	Suite, Apt #, etc.				5. Certificate of Status Desired		Additional equired	
City & State	2					6. Election Campaign Financing	····		
23 Concord, NH 28						Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country Zip		———	Country		8. This corporation has liability for intangible tax under s. 199.032,			
24 03301		29	30				Yes Mi No		
OT (9, Name and Address of Currer	it Hegistered Agent		81	Name	10. Name and Address of New Re	gistered Agent		
	CORPORATION SYSTEM O S. PINE ISLAND ROAD								
PLANTATION FL 33324				82	Street Add	fress (P.O. Box Number is Not Acceptat	ole)		
	THE TOTAL TENTE			83					
				84	City		85 Zip	Code	
					•		FL "		
11. Pursuant to office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State)2 and 607.1508, Florida S of Florida, Such change y	tatutes, the	above ed by	named cor the corpora	poration submits this statement for the pation's board of directors. I hereby accept	ourpose of changing of the appointment as	its registered registered	
agent Far	mitanuliar with, and accept the oblig	ations of Section 607.0506	5, Florida St	atutes		,,			
SIGNATURE	Signature, typical or per this man e of tripislated age	and and the Langinghia	/MOTE: Donieto	ed Ago	nt eignatura tagu	lired when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFIC		RS IN 12	
TILE	CEOD	☐ DELETE	1.1	TITLE	(CD	Change	☐ Addition	
NAME	O'HARE, DEAN R			1.2 NAME					
STREET ADDRESS	15 MOUNTAIN VIEW RD			1.3 STREET ADDRESS					
CITY-ST-ZIP	WARREN NJ PD	DELETE		1.4 CITY - ST - ZIP 2.1 TITLE				Addition	
TITLE NAME	STONE, THERESA M	E DELETE			(CEOPD	. BET privilide	L_J Addition	
STREET ADDRESS	ONE GRANITE PLACE			2.2 NAME 2.3 STREET ADDRESS					
City-Si-ZiP	CONCORD NH		- 1	CITY-S	1				
THILE	DVAS	☐ DELETE		3.1 TITLE		DEVAS	Change	Addition	
NAME	CORNELIO, CHARLES C		3.2	NAME	[
STREET ADDRESS	ONE GRANITE PLACE		33	STREET	ADDRESS				
CITY-S1-ZIP	CONCORD NH 03301	C DELETE	3.4	3.4. CITY-ST-ZIP			Cliffornia	Addition	
THLE	VT SIMPSON, RUSSELL C	DELETE		4.1 TITLE 4 2 NAME			☐ Change	L Addition	
NAME STREET ASDRESS	ONE GRANITE PLACE		1		ADDRESS				
City - St - 7IP	CONCORD NH 03301			CITY-S	1				
TITLE	EVD	☐ DECETE		5.1 TITLE			Change	Addition	
NAME	WERNER, RICHARD V		5.2	NAME					
STREET ADDRESS	ONE GRANITE PLACE		5.3	STREET	ADDRESS				
CITY-51-2IP	CONCORD NH	TT 72: 200		5.4 CITY - ST - ZIP				1,000	
1.11.6	SVD Condon, Frederick H	DELETE	1	61 TITLE			∐ Change	Addition	
NAME STREET ADDRESS	ONE GRANITE PLACE			NAME	ADDRESS				
CITY - \$1 - ZIP	CONCORD NH 03301			CITY-S	1				
14. I do heret	by certify that the information supplie	ed with this filing does not	quality for th	e exe	mption state	ed in Section 119.07(3)(i), Florida Statute	s. I further certify tha	t the	
informatio Lam an ol	n indicated on this annual report or s flicer or director of the corporation of	supplemental annual repor r the receiver or trustee en	n is true and npowered to	accu exec	rate and the ute this repo	at my signature shall have the same lega ort as required by Chapter 607, Florida S	al effect as if made ui Statutes; and that my	nder oath; that name	

SIGNATURE:

appears in Block 12 or Biocl

Frederick H. Condon 1/20/97

(603) 226-5249

FILED

Feb 04 1997 8:00am

Secretary of State