

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90172 005 ***150.00

DOCUMENT # F05000000005 1. Entity Name ALLMERICA PLUS INSURANCE AGENCY, INC.					
Principal Place of Business 440 LINCOLN STREET WORCESTER, MA 01653				Mailing Address 440 LINCOLN STREET WORCESTER, MA 01653	
2. Principal Place of Business		3. Mailing Address c/o Corp Secretary 440 Lincoln Street			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Worcester, MA		4. FEI Number 04-3194493	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 01653		Country		Applied For Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NORMAN, MARILYN G <input type="checkbox"/> Delete 440 LINCOLN STREET WORCESTER, MA 01653		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD John W. Chandler <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 440 Lincoln Street Worcester, MA 01653	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NUNLEY, K. DAVID <input checked="" type="checkbox"/> Delete 440 LINCOLN STREET WORCESTER, MA 01653		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Charles F. Cronin <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 440 Lincoln Street Worcester, MA 01653	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PARRY, EDWARD J III <input type="checkbox"/> Delete 440 LINCOLN STREET WORCESTER, MA 01653		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCGIVNEY, MARK C <input type="checkbox"/> Delete 440 LINCOLN STREET WORCESTER, MA 01653		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIDSON, LEE D <input type="checkbox"/> Delete 440 LINCOLN STREET WORCESTER, MA 01653		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZURATIS, MARITA <input type="checkbox"/> Delete 440 LINCOLN STREET WORCESTER, MA 01653		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date _____ Daytime Phone # _____					

ATTACHMENT

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Officers and Directors

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Allmerica Plus Insurance Agency, Inc.

<u>Director</u>	<u>Title</u>	<u>Start Date</u>
John W. Chandler	Director	02/24/2005
Lee D. Davidson	Director	12/31/2003
Marita Zuraitis	Director	11/18/2004

<u>Officer</u>	<u>Title</u>	<u>Start Date</u>
William J. Cahill Jr.	Assistant Clerk	06/01/2000
John W. Chandler	President	02/24/2005
Charles F. Cronin	Clerk	06/01/2000
Lee D. Davidson	Chief Compliance Officer	01/29/2004
	Assistant Vice President	01/29/2004
Edward P. Krause	Assistant Treasurer	01/25/2006
John R. Larson	Assistant Treasurer	02/24/2005
Mark C. McGivney	Treasurer	11/15/2001
Edward J. Parry III	Vice President	06/10/1993