

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003934

FILED
Jan 05, 2010
Secretary of State

Entity Name: UNUM GROUP CORPORATION

Current Principal Place of Business:

1 FOUNTAIN SQUARE
CHATTANOOGA, TN 37402

New Principal Place of Business:

Current Mailing Address:

1 FOUNTAIN SQUARE
CHATTANOOGA, TN 37402

New Mailing Address:

FEI Number: 62-1598430

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DPCE
Name: WATJEN, THOMAS R
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

Title: VPCS
Name: ROTH, SUSAN N
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

Title: EVP
Name: BISHOP, E L III
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

Title: VPC
Name: CORBETT, VICKI W
Address: 1 FOUNTAIN SQUARE
City-St-Zip: CHATTANOOGA, TN 37402

Title: D
Name: KINSER, THOMAS
Address: 6303 HAMILTON ISLAND ROAD
City-St-Zip: CHATTANOOGA, TN 37341

Title: VPT
Name: MCMAHON, KEVIN A
Address: 1 FOUNTAIN SQ
City-St-Zip: CHATTANOOGA, TN 37402

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: SUSAN N. ROTH

VPCS

01/05/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date