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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 11, 1999 8:00 am  
Secretary of State

05-11-1999 90045 025 \*\*\*150.00

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DOCUMENT # P97000014967

1. Corporation Name

ALLMERICA BENEFITS, INC.

Principal Place of Business

440 LINCOLN STREET  
WORECTER MA 01653

Mailing Address

440 LINCOLN STREET  
WORECTER MA 01653

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/14/1997

4. FEI Number

59-2296913

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HENDERSON, THOMAS N III  
101 EAST KENNEDY BLVD.  
SUITE 3700-BARNETT PLAZA  
TAMPA FL 33602

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S ☐ DELETE

NAME ARMSTRONG, ABIGAIL M  
STREET ADDRESS 274 BROCKELMAN RD  
CITY-ST-ZIP LANCASTER MA 01523

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Armstrong, Abigail M.

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME Blanchard, Lawrence E.

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME Erickson, Lee W.

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME Davidson, Lee D.

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME Soule, Phillip E.

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Lee W. Erickson*

Lee W. Erickson

4/28/99

(508) 855-2490

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

545557-90045-25  
P97 000014967

**Officers and Directors w/Residential Addresses**

**Allmerica Benefits, Inc.**

<u>Name</u>	<u>Title</u>	<u>Residence Address</u>
Abigail M. Armstrong	Secretary	274 Brockelman Road Lancaster, MA 01523
Lawrence E. Blanchard	Director	97 Birchwood Drive Holden, MA 01520
Lee D. Davidson	President Director	420 Templeton Road Athol, MA 01331
Lee W. Erickson	Vice President Treasurer	455 Quinapoxet Street Holden, MA 01520
Robert G. Juncau	Assistant Treasurer	9 Bayberry Lane West Millbury, MA 01527
Joseph W. MacDougall Jr.	Assistant Secretary	21 Ward Lane Westboro, MA 01581
Phillip E. Soule	Director	8 Stratton Drive Westboro, MA 01581
Christopher J. Therrien	Assistant Treasurer	110 Flagler Drive Holden, MA 01520