

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 835984

Entity Name: AMICA LIFE INSURANCE COMPANY**Current Principal Place of Business:**ONE HUNDRED AMICA WAY
LINCOLN, RI 02865**Current Mailing Address:**PO BOX 6008
PROVIDENCE, RI 02940 US**FEI Number:** 05-0340166**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000 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

Officer/Director Detail :

Title PRES., CEO & DIRECTOR
Name SHALLCROSS, III, EDMUND
Address 125 CINDYANN DR.
City-State-Zip: EAST GREENWICH RI 02818

Title SVP&GM
Name COMPANIE, SHIELA L.
Address 124 RIDGEWOOD RD.
City-State-Zip: WEST HARTFORD CT 06107

Title SR VP, CFO & TREA
Name LORING, JAMES P
Address 46 ROCKY WOODS ROAD
City-State-Zip: HOPKINTON MA 01748

Title DIRECTOR
Name CHADWICK, PATRICIA W.
Address 31 HILLCREST PARK ROAD
City-State-Zip: OLD GREENWICH CT 06870

Title DIRECTOR
Name MACHTLEY, RONALD K.
Address 1150 DOUGLAS PIKE
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name JEANS, MICHAEL D.
Address 95 WESTFORD ROAD
City-State-Zip: CONCORD MA 01742

Title DIRECTOR
Name CANALES, DEBRA A.
Address 6495 ENGH PL
City-State-Zip: TIMNATH CO 80547-2251

Title ASSISTANT VICE PRESIDENT
Name OSTER, TODD M.
Address 3 FRENCH LANE
City-State-Zip: SCITUATE RI 02857

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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: JENNIFER MORRISONSR. VP, SECRETARY &
GENERAL COUNSEL

01/19/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SR. ASSISTANT VICE PRESIDENT
Name CROUCH, WOODROW M.
Address 7 SUNSET LANE
City-State-Zip: HINGHAM MA 02043

Title DIRECTOR
Name SOUZA, DIANE D.
Address 3430 GALT OCEAN DRIVE
#1111
City-State-Zip: FORT LAUDERDALE FL 33308

Title DIRECTOR
Name PAUL, DEBRA M.
Address 14 JASONS GRANT DRIVE
City-State-Zip: CUMBERLAND RI 02864

Title SENIOR ASSISTANT VICE PRESIDENT
Name PEGG, DONALD J.
Address 120 BOYLSTON CIRCLE
City-State-Zip: SHREWSBURY MA 01545

Title ASSISTANT VICE PRESIDENT
Name MURPHY, PHILIP
Address 6 PARTON COURT
City-State-Zip: LAKE FOREST IL 60045

Title DIRECTOR
Name LOPES, JR., MATTHEW A
Address 2 VALENTINE COURT
City-State-Zip: LINCOLN RI 02865

Title DIRECTOR
Name ROBINSON-BERRY, JOAN
Address 21922 SE 39TH PLACE
City-State-Zip: SAMMAMISH WA 98075

Title DIRECTOR
Name PEARSON , HEIDI C.
Address 255 PARK STREET
City-State-Zip: NEWTON MA 02458

Title DIRECTOR
Name AVERY, JILL J.
Address 167 BRATTLE STREET
City-State-Zip: CAMBRIDGE MA 02138

Title DIRECTOR
Name MARINO, PETER M.
Address 36 HARWICH ROAD
City-State-Zip: PROVIDENCE RI 02906

Title SR. VICE PRESIDENT, SECRETARY
AND GENERAL COUNSEL
Name MORRISON, JENNIFER A.
Address 65 SOUTH STREET
City-State-Zip: FOXBORO MA 02035

Title SR. VICE PRESIDENT AND CHIEF
FINANCIAL OFFICER
Name CHUNG, SUSAN F.
Address 14 IMPERIAL PLACE
City-State-Zip: PROVIDENCE RI 02903

Title AVP
Name DROUIN, MICHELLE
Address 31 WADSWORTH STREET
City-State-Zip: GLASTONBURY CT 06033

Title DIRECTOR
Name BROWN, IVY L.
Address 17324 E HIDDEN GREEN COURT
City-State-Zip: RIO VERDE AZ 85263

Title ASSISTANT VICE PRESIDENT
Name NOBLE, BRITTANY
Address 27 ARLINE DRIVE
City-State-Zip: ATTLEBORO MA 02703