Entity Name:	TRAVELERS PERSON	AL SECURITY INSURAN	CE COMPANY

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

ONE TOWER SQUARE HARTFORD, CT 06183

Current Mailing Address:

DOCUMENT# F11000004337

ONE TOWER SQUARE HARTFORD, CT 06183

FEI Number: 06-1286264

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

Officer/Director Detail :

	Officer/Director Detail :				
	Title	DIRECTOR, CFO	Title	DIRECTOR, VC, CHIEF INVESTMENT OFFICER	
	Name	FREY, DANIEL S.	Name	HEYMAN, WILLIAM H	
Address City-State-Zip:	ONE TOWER SQUARE	Address	485 LEXINGTON AVENUE		
	City-State-Zip:	HARTFORD CT 06183	Address	SUITE 400	
			City-State-Zip:	NEW YORK NY 10017-2630	
	Title	DIRECTOR, PRESIDENT			
	Name	SEMINARA, NICHOLAS	Title	DIRECTOR, EXECUTIVE VICE PRESIDENT, GENERAL COUNSEL	
	Address	ONE TOWER SQUARE	Name	KALLA, CHRISTINE K.	
Ci	City-State-Zip:	HARTFORD CT 06183	Address	385 WASHINGTON STREET	
	Title	ASSISTANT CORPORATE SECRETARY	City-State-Zip:	ST. PAUL MN 55102	
	Name	MULCAHY, ANN B.	Title	DIRECTOR	
	Address	ONE TOWER SQUARE	Name	TOCZYDLOWSKI, GREGORY C.	
	City-State-Zip:	HARTFORD CT 06183	Address	ONE TOWER SQUARE	
			City-State-Zip:	HARTFORD CT 06183	
	Title	CORPORATE SECRETARY			
	Name	SKJERVEN, WENDY C.	Title	TREASURER	
	Address	385 WASHINGTON STREET	Name	RUSSELL, DOUGLAS K.	
	City-State-Zip:	ST. PAUL MN 55102	Address	ONE TOWER SQUARE	
	•		City-State-Zip:	HARTFORD CT 06183	

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: WENDY C. SKJERVEN

SECRETARY

05/01/2020 Date

Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No