

1.) CORPORATION NAME:

Sun Life Financial (U.S.) Services Company, Inc.

DUE DATE: **1/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CT CORPORATION SYSTEM 4701 COX ROAD SUITE 301 GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1812181**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE LIFE EXECUTIVE PARK

CITY/ST/ZIP: WELLESLEY HILLS, MA 02481-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	WESTLEY VANDER THOMPSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	ONE SUN LIFE EXECUTIVE PARK		
CITY/ST/ZIP/CO:	WELLESLEY HILLS, MA 02481-		
NAME:	SEAN NIGEL WOODROFFE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/HUMN RESOURC		
ADDRESS:	ONE SUN LIFE EXECUTIVE PARK		
CITY/ST/ZIP/CO:	WELLESLEY HILLS, MA 02481-		
NAME:	SCOTT M DAVIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	ONE SUN LIFE EXECUTIVE PARK		
CITY/ST/ZIP/CO:	WELLESLEY HILLS, MA 02481-		
NAME:	KERRI R. ANSELLO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	ONE SUN LIFE EXECUTIVE PARK		
CITY/ST/ZIP/CO:	WELLESLEY HILLS, MA 02481-		
NAME:	LARRY R. MADGE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CFO,TREA		
ADDRESS:	ONE SUN LIFE EXECUTIVE PARK		
CITY/ST/ZIP/CO:	WELLESLEY HILLS, MA 02481-		

NAME: MICHAEL K. MORAN TITLE: VP/CONTROLLER ADDRESS: ONE SUN LIFE EXECUTIVE PARK CITY/ST/ZIP/CO: WELLESLEY HILLS, MA 02481-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ KERRI R. ANSELLO</u>	<u>KERRI R. ANSELLO, SECRETARY</u>	<u>1/26/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.