

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 841015

FILED
Apr 26, 2012
Secretary of State

Entity Name: GENWORTH LIFE INSURANCE COMPANY

Current Principal Place of Business:

6620 WEST BROAD STREET
RICHMOND, VA 23230 US

New Principal Place of Business:

Current Mailing Address:

6620 W BROAD STREET
LAW DEPT, BLDG. 1
RICHMOND, VA 23230 US

New Mailing Address:

FEI Number: 91-6027719 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: DP
Name: KELLEHER, PATRICK B
Address: 6620 W BROAD ST
City-St-Zip: RICHMOND, VA 23230 US

Title: PD
Name: STINSON, THOMAS M
Address: 6620 W BROAD ST
City-St-Zip: RICHMOND, VA 23230 US

Title: SVPS
Name: BOBITZ, WARD E
Address: 6620 W BROAD STREET
City-St-Zip: RICHMOND, VA 23230 US

Title: DSVP
Name: RODAY, LEON E
Address: 6620 W BROAD ST
City-St-Zip: RICHMOND, VA 23230 US

Title: AS
Name: MYERS, THERESA A
Address: 6620 W BROAD ST
City-St-Zip: RICHMOND, VA 23230 US

Title: T
Name: PRIZZIA, GARY T
Address: 6620 W BROAD ST
City-St-Zip: RICHMOND, VA 23230 US

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: THERESA A. MYERS

AS

04/26/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date