

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 803376

**Entity Name:** BRIGHHOUSE LIFE INSURANCE COMPANY

**Current Principal Place of Business:**

11225 NORTH COMMUNITY HOUSE ROAD  
CHARLOTTE, NC 28277

**Current Mailing Address:**

11225 NORTH COMMUNITY HOUSE ROAD  
CHARLOTTE, NC 28277 US

**FEI Number: 06-0566090**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 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 CHAIRMAN, PRESIDENT, CEO,  
DIRECTOR  
Name STEIGERWALT, ERIC  
Address 11225 NORTH COMMUNITY HOUSE  
ROAD  
GRAGG BUILDING  
City-State-Zip: CHARLOTTE NC 28277

Title VP, ASST. SECRETARY  
Name JENKELOWITZ, JACOB  
Address 200 PARK AVENUE  
City-State-Zip: NEW YORK NY 10166

Title VP, SECRETARY  
Name ARRINGTON, D. BURT  
Address 11225 NORTH COMMUNITY HOUSE  
RD  
GRAGG BUILDING  
City-State-Zip: CHARLOTTE NC 28277

Title VP, TREASURER  
Name CHANG, JIN  
Address 11225 NORTH COMMUNITY HOUSE  
RD  
GRAGG BUILDING  
City-State-Zip: CHARLOTTE NC 28277

Title VP, TAX DIRECTOR  
Name ZANGHI, PHYLLIS  
Address 11225 NORTH COMMUNITY HOUSE  
RD  
GRAGG BUILDING  
City-State-Zip: CHARLOTTE NC 28277

*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: D. BURT ARRINGTON**

**SECRETARY**

**04/11/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date