

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 807069

**Entity Name:** BANKERS LIFE AND CASUALTY COMPANY

**Current Principal Place of Business:**

111 E. WACKER DRIVE  
CHICAGO, IL 60601

**Current Mailing Address:**

111 E. WACKER DRIVE  
CHICAGO, IL 60601

**FEI Number: 36-0770740**

**Certificate of Status Desired: No**

**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 PD  
Name GOLDBERG, SCOTT L  
Address 111 E. WACKER DRIVE  
City-State-Zip: CHICAGO IL 60601

Title S  
Name SPEHLER, RACHEL J  
Address 11825 N. PENNSYLVANIA STREET  
City-State-Zip: CARMEL IN 46032

Title CFO, D  
Name MCDONOUGH, PAUL H  
Address 11825 N. PENNSYLVANIA ST.  
City-State-Zip: CARMEL IN 46032

Title SVP, D  
Name KLINE, JOHN R  
Address 11825 N PENNSYLVANIA ST  
City-State-Zip: CARMEL IN 46032

Title D  
Name DETORO, KAREN J  
Address 111 E. WACKER DRIVE  
City-State-Zip: CHICAGO IL 60601

*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: RACHEL J SPEHLER**

**SECRETARY**

**07/14/2022**

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

\_\_\_\_\_  
Date