

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 807384

Entity Name: PRINCIPAL LIFE INSURANCE COMPANY

Current Principal Place of Business:

711 HIGH STREET
DES MOINES, IA 50392-0306

FILED
Apr 30, 2013
Secretary of State
CC9583365850

Current Mailing Address:

711 HIGH STREET
ATTN: SHIRLEY HOLLISTER, S-6-W87
DES MOINES, IA 50392-0306 US

FEI Number: 42-0127290

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
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 SVPS
Name HOFFMAN, JOYCE N
Address 711 HIGH ST
City-State-Zip: DES MOINES IA 50392

Title D
Name BERNARD, BETSY J
Address 711 HIGH ST.
City-State-Zip: DES MOINES IA 50392

Title P
Name HOUSTON, DANIEL J
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title P
Name MCCAUGHAN, JAMES P
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title DP
Name ZIMPLEMAN, LARRY D
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title VPT
Name BUTTON, TERESA M
Address 711 HIGH ST
City-State-Zip: DES MOINES IA 50392

Title D
Name CARTER-MILLER, JOCELYN
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title D
Name COSTLEY, GARY E
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Continues on page 2

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: JOYCE N. HOFFMAN

CORPORATE SECRETAR 04/30/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name DAN, MICHAEL T
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title D
Name GELATT, C. DANIEL JR
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title D
Name KEYSER, RICHARD L
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title D
Name TALLETT, ELIZABETH E
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title D
Name FERRO, DENNIS H
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title D
Name HELTON, SANDRA L
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title D
Name MAESTRI, LUCA
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306