

2016 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

Current Mailing Address:

711 HIGH STREET
ATTN: SHIRLEY HOLLISTER, G-031-W40
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
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 DIRECTOR
Name BERNARD, BETSY J
Address 711 HIGH ST.
City-State-Zip: DES MOINES IA 50392

Title PRESIDENT/CEO/DIRECTOR
Name HOUSTON, DANIEL J
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

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

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

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

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

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

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

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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: PATRICIA A BARRY

ASSISTANT SECRETARY 04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

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

Title ASSISTANT SECRETARY
Name BARRY, PATRICIA A
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title PRESIDENT - INTERNATIONAL ASSET
MANAGEMENT AND ACCUMULATION
Name VALDES, LUIS E
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title PRESIDENT - RETIREMENT AND INVESTORS
SERVICES
Name EVERETT, NORA M
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title DIRECTOR
Name PICKERELL, BLAIR C
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

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

Title SECRETARY
Name SHAFF, KAREN E
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title DIRECTOR
Name HOCHSCHILD, ROGER C
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title PRESIDENT - US INSURANCE
SOLUTIONS
Name STRABLE-SOETHOUT, DEANNA D
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392-0306

Title VP, TREASURER
Name GRAHAM, GINA L
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392