**2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Apr 07, 2025**
**Secretary of State**
**2012550777CC**

DOCUMENT# 808505

**Entity Name:** RELIASTAR LIFE INSURANCE COMPANY

**Current Principal Place of Business:**

250 MARQUETTE AVE., SUITE 900
MINNEAPOLIS, MN 55401

**Current Mailing Address:**

5780 POWERS FERRY ROAD NW
ATLANTA, GA 30327 US

**FEI Number: 41-0451140**

**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 | ASST. SECRETARY |
| Name | SCHULTZ, TINA |
| Address | 250 MARQUETTE AVE., SUITE 900 |
| City-State-Zip: | MINNEAPOLIS MN 55401 |

| | |
|---|---|
| Title | SECRETARY |
| Name | O'DONNELL, MELISSA |
| Address | 250 MARQUETTE AVE., SUITE 900 |
| City-State-Zip: | MINNEAPOLIS MN 55401 |

| | |
|---|---|
| Title | SENIOR VICE PRESIDENT, CRO, DIRECTOR |
| Name | O'NEILL, FRANCIS G. |
| Address | ONE ORANGE WAY |
| City-State-Zip: | WINDSOR CT 06095 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | ZIEKLE, MONA |
| Address | 250 MARQUETTE AVE., SUITE 900 |
| City-State-Zip: | MINNEAPOLIS MN 55401 |

| | |
|---|---|
| Title | SENIOR VICE PRESIDENT, CHIEF ACCOUNTING OFFICER |
| Name | OH, TONY |
| Address | 5780 POWERS FERRY ROAD NW |
| City-State-Zip: | ATLANTA GA 30327 |

| | |
|---|---|
| Title | SENIOR VICE PRESIDENT |
| Name | TOMS, MATTHEW |
| Address | 5780 POWERS FERRY ROAD NW |
| City-State-Zip: | ATLANTA GA 30327 |

| | |
|---|---|
| Title | CFO, DIRECTOR, SENIOR VICE PRESIDENT |
| Name | KATZ, MICHAEL |
| Address | 200 PARK AVENUE |
| City-State-Zip: | NEW YORK NY 10166 |

| | |
|---|---|
| Title | SVP, APPOINTED ACTUARY |
| Name | PUFFER, KYLE |
| Address | ONE ORANGE WAY |
| City-State-Zip: | WINDSOR CT 06095 |

**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: TINA SCHULTZ ASSISTANT SECRETARY 04/07/2025

Electronic Signature of Signing Officer/Director Detail — Date

**Officer/Director Detail Continued :**

| | |
|---|---|
| Title | DIRECTOR, PRESIDENT |
| Name | VAILLANCOURT, AMELIA (AMY) |
| Address | ONE ORANGE WAY |
| City-State-Zip: | WINDSOR CT 06095 |

| | |
|---|---|
| Title | SVP, TREASURER |
| Name | LUK, MICHELLE |
| Address | 200 PARK AVENUE |
| City-State-Zip: | NEW YORK NY 10166 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | JAIN, NEHA |
| Address | 200 PARK AVENUE |
| City-State-Zip: | NEW YORK NY 10166 |

| | |
|---|---|
| Title | EVP, CHIEF LEGAL OFFICER |
| Name | TO, MY CHI |
| Address | 200 PARK AVENUE |
| City-State-Zip: | NEW YORK NY 10166 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | BLAL, YOUSSEF |
| Address | 250 MARQUETTE AVE., SUITE 900 |
| City-State-Zip: | MINNEAPOLIS MN 55401 |