2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 810065

Entity Name: AMERICAN HEALTH AND LIFE INSURANCE COMPANY

FILED Jan 23, 2025 **Secretary of State** 2786379386CC

Current Principal Place of Business:

3001 MEACHAM BLVD

SUITE 100

FORT WORTH, TX 76137-4697

Current Mailing Address:

3001 MEACHAM BLVD

SUITE 100

FORT WORTH, TX 76137-4697

FEI Number: 52-0696632 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: MICHAEL JONES 01/23/2025

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PΠ Title SSVD

LEHMAN, GREGG H Name NEAL. RONALD D Name

Address 3001MEACHAM BLVD. STE. 100 Address 3001 MEACHAM BOULEVARD, STE

City-State-Zip: FORT WORTH TX 76137-4697 FORT WORTH TX 76137 City-State-Zip:

Title SVD

Title SVD JOHNSON, FAYE L Name

KOPPEN, MICHAEL F Name Address 3001 MEACHAM BLVD

Address 3001 MEACHAM BOULEVARD, STE SUITE 100

City-State-Zip: FORT WORTH TX 76137-4697 City-State-Zip: FORT WORTH TX 76137

Title TD

Title DSV VANWINKLE, DONNA Name

PASSMORE, JEFFREY R Name 3001 MEACHAM BOULEVARD, STE Address 3001 MEACHAM BLVD Address

SUITE 100 FORT WORTH TX 76137

City-State-Zip: FORT WORTH TX 76137-4697 City-State-Zip:

SVP Title

Name TORRENCE, DAVID B 3001 MEACHAM BLVD. Address

STE 100

FORT WORTH TX 76137 City-State-Zip:

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.

01/23/2025 SIGNATURE: GREGG H. LEHMAN **SECRETARY**

Date