#### 2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 810577

## Entity Name: NATIONWIDE LIFE INSURANCE COMPANY

## **Current Principal Place of Business:**

ONE WEST NATIONWIDE BOULEVARD COLUMBUS, OH 43215

## **Current Mailing Address:**

ONE WEST NATIONWIDE BOULEVARD COLUMBUS, OH 43215 US

# FEI Number: 31-4156830

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 US Certificate of Status Desired: No

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

## **Officer/Director Detail :**

	Title	DIRECTOR	Title	TREASURER
	Name	WALKER, KIRT A.	Name	LAPAUL, DAVID
	Address	ONE WEST NATIONWIDE BOULEVARD	Address	ONE WEST NATIONWIDE BOULEVARD
	City-State-Zip:	COLUMBUS OH 43215	City-State-Zip:	COLUMBUS OH 43215
	Title	DIRECTOR	Title	DIRECTOR
	Name	CARTER, JOHN L.	Name	FROMMEYER, TIMOTHY G.
	Address	ONE WEST NATIONWIDE BOULEVARD	Address	ONE WEST NATIONWIDE BOULEVARD
	City-State-Zip:	COLUMBUS OH 43215	City-State-Zip:	COLUMBUS OH 43215
	Title	DIRECTOR	Title	DIRECTOR
	Name	HENDERSON, ERIC S.	Name	THRESHER, MARK R.
	Address	ONE WEST NATIONWIDE BOULEVARD	Address	ONE WEST NATIONWIDE BOULEVARD
	City-State-Zip:	COLUMBUS OH 43215	City-State-Zip:	COLUMBUS OH 43215
	Title	DIRECTOR	Title	SECRETARY
	Name	GINNAN, STEVEN A.	Name	SKINGLE, DENISE L.
	Address	ONE WEST NATIONWIDE BOULEVARD	Address	ONE WEST NATIONWIDE BOULEVARD
	City-State-Zip:	COLUMBUS OH 43215	City-State-Zip:	COLUMBUS OH 43215

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: DENISE L. SKINGLE

SECRETARY

05/01/2020

Electronic Signature of Signing Officer/Director Detail

FILED May 01, 2020 Secretary of State 2645700786CC

Date

Date