

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 812116

Entity Name: SYMETRA LIFE INSURANCE COMPANY

Current Principal Place of Business:

777 108TH AVE NE
SUITE 1200
BELLEVUE, WA 98004-5135

Current Mailing Address:

PO BOX 34690
SEATTLE, WA 98124-1690 US

FEI Number: 91-0742147

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name MARRA, THOMAS M
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title DIRECTOR, CFO, EVP
Name MEISTER, MARGARET A
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title DIRECTOR, EVP
Name GUILBERT, DANIEL R
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title DIRECTOR, SVP, SECRETARY,
GENERAL COUNSEL
Name GOLDSTEIN, DAVID S
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title DIRECTOR, EVP
Name FRY, MICHAEL W
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title SVP, TREASURER, CONTROLLER
Name MURPHY, COLLEEN M
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title EVP
Name LAVOICE, RICHARD G
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title SVP
Name KATZMAR HOLMES, CHRISTINE A
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

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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: COLLEEN M. MURPHY

**SVP, TREASURER,
CONTROLLER**

04/23/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SVP, CHIEF ACTUARY
Name BROOKS, TOMMIE D
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title SVP
Name PIRAK, JAMES D
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title VP, ASST. SECRETARY, ASSOCIATE GENERAL
COUNSEL
Name BODMER, JULIE M
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135