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: TRAVIS TWEED

Electronic Signature of Signing Officer/Director Detail

Name KVALHEIM, GRANT Address 7700 MILLS CIVIC PARKWAY WEST DES MOINES IA 50266 City-State-Zip:

Title S Name DOERRFELD, BLAINE THOMAS Address 7700 MILLS CIVIC PARKWAY WEST DES MOINES IA 50266

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:

Title

Title

Name Address

City-State-Zip:

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 826748

Entity Name: ATHENE ANNUITY AND LIFE COMPANY

Current Principal Place of Business:

7700 MILLS CIVIC PARKWAY WEST DES MOINES. IA 50266

Current Mailing Address:

7700 MILLS CIVIC PARKWAY WEST DES MOINES. IA 50266

FEI Number: 42-0175020

TALLAHASSEE, FL 32399-0000 US

FILED Apr 13, 2020 Secretary of State 3703144860CC

04/13/2020

VICE PRESIDENT & TREASURER

Date

Date

Electronic Signature of Registered Agent

Officer/Director Detail :

т

PD

TWEED, TRAVIS 7700 MILLS CIVIC PARKWAY City-State-Zip: WEST DES MOINES IA 50266

Certificate of Status Desired: No