

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 830580

FILED
Mar 12, 2023
Secretary of State
2027068627CC

Entity Name: JOHN ALDEN LIFE INSURANCE COMPANY

Current Principal Place of Business:

21600 OXNARD STREET, SUITE 1500
WOODLAND HILLS, CA 91367

Current Mailing Address:

21600 OXNARD STREET, SUITE 1500
WOODLAND HILLS, CA 91367 US

FEI Number: 41-0999752

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: JEANNIE AMY ARAGON-CRUZ

03/12/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name HUGHES, ALAN S.
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title VP
Name GARVEY, ALTHEA E.
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title VP
Name CHEUNG-YAN HUNG, DAVID
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title PRESIDENT, DIRECTOR
Name GLICKMAN, JAMES M.
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title VP, DIRECTOR
Name PETERS, JAY R.
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title VP
Name ROGERS, JIMMY DALE
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title SECRETARY, GENERAL COUNSEL,
SENIOR VICE PRESIDENT
Name GOMEZ, JORGE
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title TREASURER, SENIOR VICE
PRESIDENT, CFO
Name SORICE, JULIANNE
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

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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: JORGE GOMEZ

SECRETARY

03/12/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SHEARBURN, KIRK R.
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title VP
Name SEEMAN, NORMAN
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR
Name COHEN, SETH L.
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR
Name GLICKMAN, MARLENE GONIK
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367

Title VP, SENIOR VICE PRESIDENT
Name DIFFLEY, PETER
Address 21600 OXNARD STREET, SUITE 1500
City-State-Zip: WOODLAND HILLS CA 91367