2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 830791

Entity Name: HORACE MANN SERVICE CORPORATION

Current Principal Place of Business:

1 HORACE MANN PLAZA ATTN: CORPORATE TAX DEPT SPRINGFIELD, IL 62715-0001

FILED May 01, 2024 Secretary of State 6611795672CC

Current Mailing Address:

1 HORACE MANN PLAZA ATTN: CORPORATE TAX DEPT SPRINGFIELD, IL 62715-0001 US

FEI Number: 37-0972590 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:

Name

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR, EXEC VP & CFO Title DIRECTOR, GENERAL COUNSEL,

CORPORATE SECRETARY & CCO CONKLIN, BRET A Name

Name CARLEY, DONALD M Address 1 HORACE MANN PLAZA

Address 1 HORACE MANN PLAZA City-State-Zip: SPRINGFIELD IL 62715 City-State-Zip: SPRINGFIELD IL 62715

Title DIRECTOR, CHAIRMAN, PRESIDENT &

Title **VP & TAX DIRECTOR** Name STUENKEL, JEREMY Name ZURAITIS, MARITA 1 HORACE MANN PLAZA Address Address 1 HORACE MANN PLAZA

City-State-Zip: SPRINGFIELD IL 62715 SPRINGFIELD IL 62715 City-State-Zip:

Title DIRECTOR & EXEC VP LIFE & Title **VP & TREASURER**

RETIREMENT GAYLE, TROY M

SHARPE, MATTHEW P Name Address 1 HORACE MANN PLAZA 1 HORACE MANN PLAZA Address City-State-Zip: SPRINGFIELD IL 62715

Title SVP, DIRECTOR Title ASSISTANT CORPORATE

Name WECKENBROCK, MICHAEL Name MICHAEL, LINEA K

1 HORACE MANN PLAZA Address Address 1 HORACE MANN PLAZA City-State-Zip: SPRINGFIELD IL 62715 City-State-Zip: SPRINGFIELD IL 62715

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SPRINGFIELD IL 62715

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.

05/01/2024 **VP & TAX DIRECTOR** SIGNATURE: JEREMY STUENKEL

Date

Officer/Director Detail Continued:

Title Title VΡ

JOHNSON, KIMBERLY A Name Name MOORE, PETER G

Address 1 HORACE MANN PLAZA Address 1 HORACE MANN PLAZA SPRINGFIELD IL 62715-0001 City-State-Zip: City-State-Zip: SPRINGFIELD IL 62715-0001

Title

Name GREENIER, RYAN Name ATTERBERRY, KRISTEN J

Address 1 HORACE MANN PLAZA Address 1 HORACE MANN PLAZA City-State-Zip: SPRINGFIELD IL 62715-0001 City-State-Zip: SPRINGFIELD IL 62715-0001

Title CHIEF HUMAN RESOURCES OFFICER Title DIRECTOR, SVP

Title

SVP

Name THAYER, JENNIFER Name DESROCHERS, MARK Address 1 HORACE MANN PLAZA Address 1 HORACE MANN PLAZA

City-State-Zip: SPRINGFIELD IL 62715-0001 City-State-Zip: SPRINGFIELD IL 62715-0001

SVP & CHIEF INFORMATION OFFICER Title Title DESIGNATED RESPONSIBLE LICENSED

PRODUCER Name FULKS, STEPHANIE ALFRED, JONES

Name Address 1 HORACE MANN PLAZA Address 1 HORACE MANN PLAZA City-State-Zip: SPRINGFIELD IL 62715 ATTN: CORPORATE TAX DEPT

City-State-Zip: SPRINGFIELD IL 62715-0001 Title **ASSISTANT VP & CHIEF**

PROCUREMENT OFFICER Title DIRECTOR, EVP & CHIEF OPERATING OFFICER

BASSETT, NEIL Name MC ANENA. STEPHEN Name

Address 1 HORACE MANN PLAZA Address

ATTN: CORPORATE TAX DEPT 1 HORACE MANN PLAZA ATTN: CORPORATE TAX DEPT

City-State-Zip: SPRINGFIELD IL 62715-0001 SPRINGFIELD IL 62715-0001 City-State-Zip: