

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 830791

**FILED**  
**May 01, 2024**  
**Secretary of State**  
**6611795672CC**

**Entity Name:** HORACE MANN SERVICE CORPORATION

**Current Principal Place of Business:**

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

**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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DIRECTOR, EXEC VP & CFO  
Name CONKLIN, BRET A  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715

Title DIRECTOR, GENERAL COUNSEL,  
CORPORATE SECRETARY & CCO  
Name CARLEY, DONALD M  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715

Title DIRECTOR, CHAIRMAN, PRESIDENT &  
CEO  
Name ZURAITIS, MARITA  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715

Title VP & TAX DIRECTOR  
Name STUENKEL, JEREMY  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715

Title VP & TREASURER  
Name GAYLE, TROY M  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715

Title DIRECTOR & EXEC VP LIFE &  
RETIREMENT  
Name SHARPE, MATTHEW P  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715

Title SVP, DIRECTOR  
Name WECKENBROCK, MICHAEL  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715

Title ASSISTANT CORPORATE  
SECRETARY  
Name MICHAEL, LINEA K  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715

**Continues on page 2**

*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:** JEREMY STUENKEL

**VP & TAX DIRECTOR**

**05/01/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title SVP  
Name JOHNSON, KIMBERLY A  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715-0001

Title VP  
Name ATTERBERRY, KRISTEN J  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715-0001

Title DIRECTOR, SVP  
Name DESROCHERS, MARK  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715-0001

Title DESIGNATED RESPONSIBLE LICENSED  
PRODUCER  
Name ALFRED, JONES  
Address 1 HORACE MANN PLAZA  
ATTN: CORPORATE TAX DEPT  
City-State-Zip: SPRINGFIELD IL 62715-0001

Title DIRECTOR, EVP & CHIEF OPERATING OFFICER  
Name MC ANENA, STEPHEN  
Address 1 HORACE MANN PLAZA  
ATTN: CORPORATE TAX DEPT  
City-State-Zip: SPRINGFIELD IL 62715-0001

Title VP  
Name MOORE, PETER G  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715-0001

Title SVP  
Name GREENIER, RYAN  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715-0001

Title CHIEF HUMAN RESOURCES OFFICER  
Name THAYER, JENNIFER  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715-0001

Title SVP & CHIEF INFORMATION OFFICER  
Name FULKS, STEPHANIE  
Address 1 HORACE MANN PLAZA  
City-State-Zip: SPRINGFIELD IL 62715

Title ASSISTANT VP & CHIEF  
PROCUREMENT OFFICER  
Name BASSETT, NEIL  
Address 1 HORACE MANN PLAZA  
ATTN: CORPORATE TAX DEPT  
City-State-Zip: SPRINGFIELD IL 62715-0001