## **2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 835043** 

Entity Name: MID-WEST NATIONAL LIFE INSURANCE COMPANY OF

**TENNESSEE** 

**Current Principal Place of Business:** 

9151 BOULEVARD 26

NORTH RICHLAND HILLS, TX 76180

**Current Mailing Address:** 

9151 BOULEVARD 26

NORTH RICHLAND HILLS, TX 76180 US

FEI Number: 62-0724538 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 EAST GAINES STREET TALLAHASSEE, FL 32399-0000 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Apr 24, 2023

**Secretary of State** 

5516312868CC

Officer/Director Detail:

Title Title CFO, DIRECTOR

Name COTTINGTON, NYLE BRENT Name SCHOETTLE, JEREMY MICHAEL

Address 9800 HEALTH CARE LANE Address 7440 WOODLAND DRIVE City-State-Zip: MINNETONKA MN 55343 City-State-Zip: INDIANAPOLIS IN 46278

VΡ Title **DIRECTOR** Title

Name RISUCCI, TARYN SARAH Name GARRISON, DANIEL SCOTT

Address 9151 BOULEVARD 26 Address 9151 BOULEVARD 26

City-State-Zip: NORTH RICHLAND HILLS TX 76180 City-State-Zip: NORTH RICHLAND HILLS TX 76180

Title ASSISTANT SECRETARY Title PRESIDENT, DIRECTOR, CHAIRMAN

Name LANG, HEATHER ANASTASIA COSGRIFF, JOHN WILLIAM Name Address

9900 BREN ROAD EAST Address 9700 HEALTH CARE LANE City-State-Zip: MINNETONKA MN 55343 City-State-Zip: MINNETONKA MN 55343

**DIRECTOR** Title Title TREASURER, CHIEF INVESTMENT **OFFICER** 

Name GABRIEL, JAMES MARK GILL, PETER MARSHALL Name Address 2020 INNOVATION COURT

Address 9900 BREN ROAD EAST City-State-Zip: DE PERE WI 54115

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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: HEATHER ANASTASIA LANG

MINNETONKA MN 55343

ASSISTANT SECRETARY

04/24/2023

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title SECRETARY, GENERAL COUNSEL

Name MASON, JAMES CHRISTOPHER Name LEWIS-DAVID, JENNIFER LUNDGREN

Address 3400 N. ASHTON BLVD. Address 10175 LITTLE PATUXENT

STE. 450

City-State-Zip: LEHI UT 84043

City-State-Zip: COLUMBIA MD 21044