2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 838355

Entity Name: MADISON NATIONAL LIFE INSURANCE COMPANY, INC. OF

WISCONSIN

FILED
Jan 10, 2014
Secretary of State
CC9643361206

Current Principal Place of Business:

1241 JOHN Q HAMMONS DRIVE MADISON, WI 53717

Current Mailing Address:

P.O. BOX 5008 MADISON, WI 53705

FEI Number: 39-0990296 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 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 V Title TV

Name MYROLD, JOEL Name SCHAUER, DIANE L

Address 1241 JOHN Q HAMMONS DRIVE Address 1241 JOHN Q HAMMONS DRIVE

City-State-Zip: MADISON WI 53717 City-State-Zip: MADISON WI 53717

Title P Title SV

Name GRABER, LARRY R Name KETTIG, DAVID T

Address 3508 FAR WEST BLVD., SUITE 360 Address 485 MADISON AVE., 14TH FLOOR

City-State-Zip: AUSTIN TX 78731 City-State-Zip: NEW YORK NY 10002-5872

Title EV Title S

Name STUBBE, ROBERT Name VANDERVOORT, ADAM C

Address 1241 JOHN Q HAMMONS DRIVE Address 485 MADISON AVE.

City-State-Zip: MADISON WI 53717 City-State-Zip: NEW YORK NY 10022

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: ROBERT J. STUBBE

EXECUTIVE VICE PRESIDENT

01/10/2014