

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844892

Entity Name: SYMETRA NATIONAL LIFE INSURANCE COMPANY

FILED
Apr 14, 2014
Secretary of State
CC6286633183

Current Principal Place of Business:

777 108TH AVE NE
SUITE 1200
BELLEVUE, WA 98004-5135

Current Mailing Address:

PO BOX 34690
SEATTLE, WA 98124-1690 US

FEI Number: 91-1079693

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHEIF FINANCIAL OFFICER
1200 S PINE ISLAND ROAD
PLANTATION, FL 33324 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, PRESIDENT
Name MARRA, THOMAS M
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title DIRECTOR, EVP, CFO
Name MEISTER, MARGARET A
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title SVP
Name KATZMAR-HOLMES, CHRISTINE A
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title DIRECTOR, EVP
Name FRY, MICHAEL W
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title DIRECTOR, SVP, SECRETARY,
GENERAL COUNSEL
Name GOLDSTEIN, DAVID S
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title DIRECTOR, EVP
Name GUILBERT, DANIEL R
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title SVP, CHIEF ACTUARY
Name BROOKS, TOMMIE D
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title SVP
Name MCKINNON, GEORGE N
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

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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: COLLEEN M. MURPHY

SENIOR VICE
PRESIDENT,
CONTROLLER, TREASUR

04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SVP
Name PIRAK, JAMES D
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title EVP
Name LAVOICE, RICHARD G
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title SVP, TREASURER, CONTROLLER
Name MURPHY, COLLEEN M
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135

Title VP, ASST. SECRETARY, ASSOCIATE
GENERAL COUNSEL
Name VENEZIANI, JACQUELINE M
Address 777 108TH AVE NE
SUITE 1200
City-State-Zip: BELLEVUE WA 98004-5135