

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 848325

Entity Name: NEW YORK LIFE INSURANCE AND ANNUITY CORPORATION**Current Principal Place of Business:**51 MADISON AVENUE
NEW YORK, NY 10010**Current Mailing Address:**51 MADISON AVENUE
NEW YORK, NY 10010 US**FEI Number: 13-3044743****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E. GAINES ST
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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MILLER, AMY
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name MADGETT, MARK J.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name STEINBERG, JOEL M.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name HUANG, DYLAN W.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title CEO, PRESIDENT, COB, DIRECTOR
Name MATHAS, THEODORE A.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name WION, MATTHEW D.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name SETER, ARTHUR H.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title SVP, TREASURER, DIRECTOR
Name HENDRY, THOMAS A.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

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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 A. MEADE**SECRETARY****06/24/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HARTE, FRANCIS MICHAEL
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name GARDNER, ROBERT M.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name COOK, ALEXANDER I. M.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name BEDARD, DAVID G.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title VP
Name AUGUST, JAMES R.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title SECRETARY
Name MEADE, COLLEEN A.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name GROVE, MATTHEW M.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title EVP, CFO
Name FELDSTEIN, ERIC
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name BRILL, ELIZABETH K.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title VP
Name AXBERG, KARI
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name ASHE, CHRISTOPHER T.
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010