

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 848325

Entity Name: NEW YORK LIFE INSURANCE AND ANNUITY CORPORATION

FILED
May 02, 2016
Secretary of State
CC0242382560

Current Principal Place of Business:

51 MADISON AVE.
10SB
NEW YORK, NY 10010

Current Mailing Address:

51 MADISON AVE.
10SB
NEW YORK, NY 10010

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, SVP
Name GROVE, MATTHEW M.
Address 51 MADISON AVE
City-State-Zip: NEW YORK NY 10010

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

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

Title SVP, CHIEF LEGAL OFFICER
Name ENGLISH, THOMAS F
Address 51 MADISON AVE.
City-State-Zip: NEW YORK NY

Title SVP, DIRECTOR, CHIEF INVESTMENT OFFICER
Name SETER, ARTHUR H
Address 51 MADISON AVE.
City-State-Zip: NEW YORK NY 10010

Title EVP, DIRECTOR
Name BLUNT, CHRISTOPHER O
Address 51 MADISON AVE.
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR, SVP
Name ASHE, CHRISTOPHER
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR, CFO, EVP
Name FLEURANT, JOHN T.
Address 51 MADISON AVE.
10SB
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: ELIZABETH A. SHARRIER

ASS. SECRETARY

05/02/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, VP
Name GARDNER, ROBERT M.
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010

Title SVP, DIRECTOR
Name STEINBERG, JOEL M.
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010

Title ASST. SECRETARY
Name SHARRIER, ELIZABETH A.
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR, VP
Name HUANG, DYLAN W.
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR, SVP
Name WION, MATTHEW D.
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR, SVP
Name BEDARD, DAVID G.
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name THROPE, SUSAN A.
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR, PRESIDENT
Name KIM, JOHN Y
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name MADGETT, MARK W.
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR, SVP, TREASURER
Name HENDRY, THOMAS A.
Address 51 MADISON AVE.
10SB
City-State-Zip: NEW YORK NY 10010