

2023 FOREIGN PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 848325

FILED
May 16, 2023
Secretary of State
6563077229CR

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 OFFICE
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: SHANNON DIAMOND, ASSISTANT SECRETARY

05/16/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN OF THE BOARD, CEO,
PRESIDENT, DIRECTOR
Name DESANTO, CRAIG LAWRENCE
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title SENIOR VICE PRESIDENT, CHIEF
ACTUARY, DIRECTOR
Name BRILL, ELIZABETH KATHERINE
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title SENIOR VICE PRESIDENT,
TREASURER, DIRECTOR
Name HENDRY, THOMAS ALEXANDER
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title EXECUTIVE VICE PRESIDENT, CFO,
DIRECTOR
Name FELDSTEIN, ERIC ANSEL
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title SENIOR VICE PRESIDENT,
CONTROLLER, DIRECTOR
Name GARDNER, ROBERT MICHAEL
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title ASSOCIATE GENERAL COUNSEL,
SECRETARY
Name MEADE, COLLEEN ANNE
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name MUNRO COOK, ALEXANDER
IBBITSON
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name HARTE, FRANK MICHAEL
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 ANNE MEADE

**ASSOCIATE GENERAL
COUNSEL, SECRETARY**

05/16/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KRAVITZ, JODI LYNN
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

Title DIRECTOR
Name MALLOY, ANTHONY RAMSEY
Address 51 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

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

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

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