

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 849836

Entity Name: MUTUAL OF AMERICA LIFE INSURANCE COMPANY

FILED
Mar 10, 2015
Secretary of State
CC2858849216

Current Principal Place of Business:

320 PARK AVENUE
C/O CORPORATE TAX
NEW YORK, NY 10022

Current Mailing Address:

320 PARK AVENUE
C/O CORPORATE TAX
NEW YORK, NY 10022 US

FEI Number: 13-1614399

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200E. 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 CEOD
Name MORAN, THOMAS J
Address 320 PARK AVENUE
City-State-Zip: NEW YORK NY 10022

Title COO
Name CONWAY, WILLIAM S
Address 320 PARK AVENUE
City-State-Zip: NEW YORK NY 10022

Title SVPD
Name GREED, JOHN R
Address 320 PARK AVENUE
City-State-Zip: NEW YORK NY 10022

Title EVP
Name ROTH, JAMES J
Address 320 PARK AVENUE
City-State-Zip: NEW YORK NY 10022

Title EVP
Name BROWN, JEREMY J
Address 320 PARK AVENUE
City-State-Zip: NEW YORK NY 10022

Title SVP
Name GANNON, HAROLD J
Address 320 PARK AVENUE
City-State-Zip: NEW YORK NY 10022

Title OFFICER, SECRETARY, EVP
Name ARAMONY, DIANE M
Address 320 PARK AVENUE
 C/O CORPORATE TAX
City-State-Zip: NEW YORK NY 10022

Title SEVP, CMO
Name ROSE, WILLIAM
Address 320 PARK AVENUE
 C/O CORPORATE TAX
City-State-Zip: NEW YORK NY 10022

Continues on page 2

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: GANNON, HAROLD

SVP

03/10/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title EVP
Name FESTOG, CHRIS W
Address 320 PARK AVENUE
C/O CORPORATE TAX
City-State-Zip: NEW YORK NY 10022

Title EVP
Name HERMAN, THEODORE L
Address 320 PARK AVENUE
C/O CORPORATE TAX
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Title EVP
Name ROTHSTEIN, SCOTT H
Address 320 PARK AVENUE
C/O CORPORATE TAX
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Title EVP
Name CORRIGAN, JOHN J
Address 320 PARK AVENUE
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Title EVP
Name GUTMAN, JARED
Address 320 PARK AVENUE
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Title EVP
Name MEDLIN, GEORGE L
Address 320 PARK AVENUE
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Title DIRECTOR
Name MORAN, THOMAS J
Address 320 PARK AVENUE
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Title DIRECTOR
Name MACK, CONNIE
Address 320 PARK AVENUE
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Title DIRECTOR
Name ALEXANDER, JR, CLIFFORD L
Address 320 PARK AVENUE
C/O CORPORATE TAX
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Title DIRECTOR
Name MCGUIRE, ROBERT J

Title EVP
Name GILLIAM, THOMAS E
Address 320 PARK AVENUE
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Title EVP
Name LU, KATHRYN A
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Title EVP
Name ANGELO, JEFFREY M
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Title EVP
Name GIAQUINTO, ROBERT
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Title EVP
Name LASAFFRE, DANIEL J
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Title EVP
Name SQUIRES, JOAN M
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Title DIRECTOR
Name HARBISON, JR, EARLE H
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Title DIRECTOR
Name REIMER, DENNIS J
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Title DIRECTOR
Name HAVER, MAURINE A
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Title DIRECTOR
Name WIESEL, ELIE

Address 320 PARK AVENUE
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Title DIRECTOR
Name CASIANO, KIMBERLY A

Address 320 PARK AVENUE
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Title DIRECTOR
Name GREED, JOHN R

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Title DIRECTOR
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Title DIRECTOR
Name PORTER, ROGER B

Address 320 PARK AVENUE
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Title DIRECTOR
Name LEFFALL, JR, LASALLE D

Address 320 PARK AVENUE
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Title DIRECTOR
Name HESSELBEIN, FRANCES R

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