2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001951

Entity Name: BANKERS RESERVE LIFE INSURANCE COMPANY OF

WISCONSIN

Current Principal Place of Business:

7700 FORSYTH BOULEVARD

SUITE 800

ST. LOUIS, MO 63105

Current Mailing Address:

7700 FORSYTH BOULEVARD SUITE 800 ST. LOUIS, MO 63105 US

FEI Number: 39-0993433 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH 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

FILED Apr 16, 2018

Secretary of State

CC2218806629

Officer/Director Detail:

Title Title DIRECTOR

EGGERT, MARK W. WILLIAMSON, KEITH H. Name Name

7700 FORSYTH BOULEVARD Address 7700 FORSYTH BOULEVARD Address

> SUITE 800 SUITE 800

City-State-Zip: ST. LOUIS MO 63105 City-State-Zip: ST. LOUIS MO 63105

VΡ VΡ Title Title

Name MUNIN, HOLLY Name BOWERS, CHRISTOPHER

Address 7700 FORSYTH BOULEVARD Address 7700 FORSYTH BOULEVARD

SUITE 800 SUITE 800

ST. LOUIS MO 63105 ST. LOUIS MO 63105 City-State-Zip: City-State-Zip:

Title VICE PRESIDENT OF TAX Title VP

Name DINKELMAN, TRICIA Name **BRADLEY-WELLS, KATHY**

Address 7700 FORSYTH BOULEVARD Address 7700 FORSYTH BOULEVARD

SUITE 800 SUITE 800

City-State-Zip: City-State-Zip: ST. LOUIS MO 63105 ST. LOUIS MO 63105

VΡ Title DIRECTOR Title

Name SCHWANEKE, JEFFREY A. Name WILLIAMSON, KEITH H.

7700 FORSYTH BOULEVARD 7700 FORSYTH BOULEVARD Address Address **SUITE 800**

SUITE 800

ST. LOUIS MO 63105 ST. LOUIS MO 63105 City-State-Zip: City-State-Zip:

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: TRICIA DINKELMAN

VICE PRESIDENT OF TAX 04/16/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title SECRETARY

Name WILLIAMSON, KEITH H.

Address 7700 FORSYTH BOULEVARD

SUITE 800

City-State-Zip: ST. LOUIS MO 63105

Title DIRECTOR

Name MEYER, DARREN

Address 7700 FORSYTH BOULEVARD

SUITE 800

City-State-Zip: ST. LOUIS MO 63105

Title VP

Name NEIDORFF, MICHAEL F.

Address 7700 FORSYTH BOULEVARD

SUITE 800

City-State-Zip: ST. LOUIS MO 63105

Title PRESIDENT

Name SCHWANEKE, JEFFREY A.

Address 7700 FORSYTH BOULEVARD

SUITE 800

City-State-Zip: ST. LOUIS MO 63105

Title VP

Name MEYER, DARREN

Address 7700 FORSYTH BOULEVARD

SUITE 800

City-State-Zip: ST. LOUIS MO 63105