

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00448

Entity Name: NATIONAL FOUNDATION LIFE INSURANCE COMPANY

Current Principal Place of Business:

300 BURNETT STREET, SUITE 200
FT. WORTH, TX 76102

Current Mailing Address:

300 BURNETT STREET, SUITE 200
FT. WORTH, TX 76102 US

FEI Number: 73-1187572

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 EAST GAINES STREET
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 PRESIDENT
Name MCQUAGGE, TROY ALAN
Address 300 BURNETT STREET, SUITE 200
City-State-Zip: FT. WORTH TX 76102

Title OFFICER
Name JACKSON, JAMES LEE
Address 300 BURNETT STREET, SUITE 200
City-State-Zip: FT. WORTH TX 76102

Title SECRETARY
Name LEWIS-DAVID, JENNIFER LUNDGREN
Address 10175 LITTLE PATUXENT PARKWAY
City-State-Zip: COLUMBIA MD 21044

Title OFFICER
Name SCHOETTLE, JEREMY MICHAEL
Address 7440 WOODLAND DRIVE
City-State-Zip: INDIANAPOLIS IN 46278

Title SECRETARY
Name KOBER, KONRAD HENRY
Address 300 BURNETT STREET, SUITE 200
City-State-Zip: FORT WORTH TX 76102

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: KONRAD KOBER

CHIEF ADMINISTRATION 03/25/2021
OFFICER

Electronic Signature of Signing Officer/Director Detail

Date