

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02589

Entity Name: FIDELITY INVESTMENTS LIFE INSURANCE COMPANY**Current Principal Place of Business:**49 NORTH 400 WEST
6TH FLOOR
SALT LAKE CITY, UT 84101**Current Mailing Address:**900 SALEM STREET, OT1W2
SMITHFIELD, RI 02917 US**FEI Number:** 23-2164784**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WARRICK, LANCE
PO-BOX 6200 (32314-6200)
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:** LANCE WARRICK

03/07/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name MEI, MILES
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title PRESIDENT
Name GOLINO, DAVID ANTHONY
Address 900 SALEM STREET
MAIL ZONE OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title ACTUARY
Name LEACH, ROBERT KEVIN
Address 900 SALEM STREET
MAILZONE OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title OTHER
Name ROBERT, REGAN GERARD
Address 900 SALEM STREET
MAIL ZONE OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title SECRETARY, GENERAL COUNSEL
Name WARRICK, LANCE ALDAN
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title CFO
Name GOLINO, DAVID ANTHONY
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title OTHER
Name ANDREA, JAMES FRANCIS JR.
Address 900 SALEM STREET
MAIL ZONE OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title OTHER
Name LEARY, BRIAN NEIL
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

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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: MILES MEI

TREASURER

03/07/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OTHER
Name TRIVEDI, DEEPA RAO
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name JAMIESON, JANE PALESTINE
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name PRIOR, NANCY DELIA
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name ROHDA, RODNEY RAYMOND
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name JOHN, WENDY ELOISE
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name COMPSON, RICHARD GRAY
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name LITLE, ROBERT WILLIAM
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title OTHER
Name ROWLAND, RICHARD SCOTT
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name JOHNSON, WILLIAM JOSEPH JR.
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name MACKAY, MALCOLM
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name VARGO, DAVID JAMES
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name SERVISON, ROGER THEODORE
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917

Title DIRECTOR
Name DUNN, KATHRYN ANN
Address 900 SALEM STREET, OT1W2
City-State-Zip: SMITHFIELD RI 02917