

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07552

**Entity Name:** FORETHOUGHT LIFE INSURANCE COMPANY

**Current Principal Place of Business:**

10 WEST MARKET STREET  
SUITE 2300  
INDIANAPOLIS, IN 46204

**Current Mailing Address:**

10 WEST MARKET STREET  
SUITE 2300  
INDIANAPOLIS, IN 46204 US

**FEI Number:** 06-1016329

**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

**Officer/Director Detail :**

Title DIRECTOR  
Name ARENA JR, ROBERT MICHAEL  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title PRESIDENTC  
Name ARENA JR, ROBERT MICHAEL  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name DEMAYO, EILEEN  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name DORUSKA, THOMAS  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title TREASURER  
Name GIAMALIS, JOHN NICHOLAS  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name GREENHUT, ADAM  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR  
Name JACOBY, DAVID ALLEN  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title CFO  
Name JACOBY, DAVID ALLEN  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

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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:** VIRGINIA HOPE JOHNSON

**SECRETARY**

**05/29/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name JAWORSKI, DOUGLAS  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name KOHRMAN, DEBORAH  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name LASICK, DONNA  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR  
Name LEE, HANBEN KIM  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name MULDOON, JAMIE  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name VYNALEK, RICHARD  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR  
Name WILKEN, DAVID PAUL  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title SECRETARY  
Name JOHNSON, VIRGINIA HOPE  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name KRISHNAN, LAKSHMI  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name LEAVEY, KEVIN F.  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name MAXWELL, TONYA RACHELLE  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR  
Name TODD, ERIC DAVID  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name WAGNER, NATALIE ROSE  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name WINICK, ALICIA  
Address 10 WEST MARKET STREET  
SUITE 2300  
City-State-Zip: INDIANAPOLIS IN 46204