

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P33481

**FILED**  
**Mar 17, 2016**  
**Secretary of State**  
**CC0452262323**

**Entity Name:** VOYA FINANCIAL ADVISORS, INC.

**Current Principal Place of Business:**

909 LOCUST STREET  
DES MOINES, IA 50309

**Current Mailing Address:**

909 LOCUST STREET  
DES MOINES, IA 50309 US

**FEI Number:** 41-0945505

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. 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 ASST. SECRETARY  
Name SCHULTZ, TINA  
Address 20 WASHINGTON AVENUE SOUTH  
City-State-Zip: MINNEAPOLIS MN 55401

Title SECRETARY, SVP  
Name HUDDLESTON, MEGAN  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

Title TREASURER, SVP  
Name PENDERGRASS, DAVID  
Address 5780 POWERS FERRY RD NW  
City-State-Zip: ATLANTA GA 30327

Title DIRECTOR, CEO  
Name LINTON, RICHARD JR.  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

Title ASSISTANT CHIEF FINANCIAL OFFICER  
Name WILSON, BRIAN  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

Title ASST. SECRETARY  
Name O'DONNELL, MELISSA  
Address 20 WASHINGTON AVENUE SOUTH  
City-State-Zip: MINNEAPOLIS MN 55401

Title ASST. SECRETARY  
Name OGREN, JENNIFER M.  
Address 20 WASHINGTON AVENUE SOUTH  
City-State-Zip: MINNEAPOLIS MN 55401

Title ASST. SECRETARY  
Name LATTERY, ANGELIA M.  
Address 20 WASHINGTON AVENUE SOUTH  
City-State-Zip: MINNEAPOLIS MN 55401

**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:** TINA SCHULTZ

**ASSISTANT SECRETARY** 03/17/2016

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title CFO  
Name HULTGREN, KRISTIN  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

Title TAX OFFICER  
Name OWENS, TERRY  
Address 5780 POWERS FERRY ROAD NW  
City-State-Zip: ATLANTA GA 30327

Title VP, ASST. TREASURER  
Name SHELL, SPENCER T.  
Address 5780 POWERS FERRY ROAD NW  
City-State-Zip: ATLANTA GA 30327

Title SVP, TAX  
Name ELMY, JOSEPH  
Address 5780 POWERS FERRY ROAD NW  
City-State-Zip: ATLANTA GA 30327

Title COO, DIRECTOR  
Name KAHRMANN, ANGELA  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

Title VP  
Name ABBOTT, ROSS  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

Title SENIOR VICE PRESIDENT, BROKER-DEALER  
CHIEF COMPLIANCE OFFICER  
Name GIOFFRE, MICHAEL J.  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

Title TAX OFFICER  
Name ENSLEY, JAMES DOUGLAS  
Address 5780 POWERS FERRY ROAD NW  
City-State-Zip: ATLANTA GA 30327

Title VP  
Name LITOW, FREDERICK  
Address 5780 POWERS FERRY ROAD NW  
City-State-Zip: ATLANTA GA 30327

Title VP  
Name STYCH, KEVIN  
Address 909 LOCUST STREET  
City-State-Zip: DES MOINES IA 50309

Title PRESIDENT, DIRECTOR  
Name HALLORAN, THOMAS W.  
Address 30 BRAINTREE HILL OFFICE PARK  
City-State-Zip: BRAINTREE MA 02184

Title VP  
Name HURLEY, CHRISTINA  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

Title VP  
Name VEENSTRA, SASHA  
Address 909 LOCUST STREET  
City-State-Zip: DES MOINES IA 50309

Title VP, CHIEF COUNSEL, INVESTMENT  
ADVISOR CHIEF COMPLIANCE  
OFFICER  
Name SIDES, MARK A.  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095