2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: MIDLAND NATIONAL LIFE INSURANCE COMPANY

Current Principal Place of Business:

ONE SAMMONS PLAZA
SIOUX FALLS, SD 57193

New Principal Place of Business:

4350 WESTOWN PARKWAY
WEST DES MOINES, IA 50266

Current Mailing Address:

ONE SAMMONS PLAZA
SIOUX FALLS, SD 57193

New Mailing Address:

FEI Number: 46-0164570 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P.O. BOX 6200 (32314-6200)
200 E. GAINES STREET
TALLAHASSEE, FL 323990000 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: V
Name: LYONS, DONALD T
Address: 4350 WESTOWN PARKWAY
City-St-Zip: WEST DES MOINES, IA 50266

Title: CD
Name: DINSHAW, ESFANDYAR E
Address: 4350 WESTOWN PARKWAY
City-St-Zip: WEST DES MOINES, IA 50266

Title: V
Name: KIEFER, DANIEL M
Address: 5400 S SOLBERG AVE
City-St-Zip: SIOUX FALLS, SD 57108

Title: VS
Name: FIMEA, VICTORIA E
Address: 4350 WESTOWN PARKWAY
City-St-Zip: WEST DES MOINES, IA 50266

Title: PD
Name: PALMITIER, STEVEN C
Address: 525 WEST VAN BUREN
City-St-Zip: CHICAGO, IL 60606

Title: VTD
Name: CRAIG, JOHN J II
Address: 4350 WESTOWN PARKWAY
City-St-Zip: WEST DES MOINES, IA 50266

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: DANIEL M. KIEFER V 04/18/2012

Electronic Signature of Signing Officer or Director — Date