2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 822715

FILED Apr 04, 2012 Secretary of State

Entity Name: THE VARIABLE ANNUITY LIFE INSURANCE COMPANY

Current Principal Place of Business: New Principal Place of Business:

2929 ALLEN PARKWAY

A6-20

HOUSTON, TX 77019 US

Current Mailing Address: New Mailing Address:

2929 ALLEN PARKWAY A6-20

HOUSTON, TX 77019 US

FEI Number: 74-1625348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: VF

Name: COPPEDGE, JIM
Address: 2929 ALLEN PARKWAY
City-St-Zip: HOUSTON, TX 77019

Title: SVP

Name: JORGENSEN, DAVID S Address: 2929 ALLEN PARKWAY City-St-Zip: HOUSTON, TX 77019

Title: F

Name: ABRAMS, BRUCE R
Address: 2929 ALLEN PARKWAY
City-St-Zip: HOUSTON, TX 77019

Title: EVP

Name: AKERS, MICHAEL J Address: 2929 ALLEN PARKWAY City-St-Zip: HOUSTON, TX 77019

Title: VPT

Name: MCNEAL, LOUIS V Address: 2929 ALLEN PARKWAY City-St-Zip: HOUSTON, TX 77019

Title: SVP

Name: DEN BOER, DAVID H Address: 2929 ALLEN PARKWAY City-St-Zip: HOUSTON, TX 77019

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: DAVID S. JORGENSEN SVP 04/04/2012