

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 835833

FILED
Apr 06, 2012
Secretary of State

Entity Name: GREAT-WEST LIFE & ANNUITY INSURANCE COMPANY

Current Principal Place of Business:

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111 US

New Principal Place of Business:

Current Mailing Address:

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111 US

New Mailing Address:

FEI Number: 84-0467907

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 ST
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: PD
Name: GRAYE, MITCHELL T G
Address: 8515 E ORCHARD RD
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

Title: VP
Name: SHAW, ROBERT
Address: 8515 E ORCHARD RD
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

Title: CIO
Name: CORBETT, S. MARK
Address: 8515 E ORCHARD RD
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

Title: SEC
Name: SCHULTZ, RICHARD G
Address: 8525 E ORCHARD RD
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

Title: D
Name: DESMARAIS, ANDRE R
Address: 751 VICTORIA SQUARE
City-St-Zip: MONTREAL, QU H2YSJ CA

Title: D
Name: BALOG, JAMES
Address: 2205 N SOUTHWINDS BLVD. APT. 307
City-St-Zip: VERO BEACH, FL 32963 US

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: RICHARD G. SCHULTZ

SEC

04/06/2012

Electronic Signature of Signing Officer or Director

Date