### **2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000079910

**Entity Name: AMERICAN BENEFIT LIFE INSURANCE COMPANY** 

FILED
Jan 20, 2020
Secretary of State
4079470618CC

# **Current Principal Place of Business:**

1605 LBJ FREEWAY

710

DALLAS, TX 75234

## **Current Mailing Address:**

1605 LBJ FREEWAY 710

DALLAS, TX 75234

FEI Number: 73-0353520 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

FLORIDA DEPARTMENT OF FINANCIAL SERVICES 515 EAST PARK AVE.
TALLHASSEE, 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: JIMMY PATRONIS 01/20/2020

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title P, D Title VP,D

Name PHILLIPS, BRADFORD Name VAUGHAN, VAN

Address 1605 LBJ FWY, SUITE 710 Address 1605 LBJ FWY, SUITE 710

City-State-Zip: DALLAS TX 75234 City-State-Zip: DALLAS TX 75234

TitleVPTitleSVP COMPLIANCENameHAYDEN, THOMASNameGUSTAFSON, JANETAddress1605 LBJ FWY, SUITE 710Address1605 LBJ FWY, SUITE 700

City-State-Zip: DALLAS TX 75234 City-State-Zip: DALLAS TX 75234

Title VP Title S

Name VRLA, DAVID Name CORNA, LOUIS

Address 1605 LBJ FWY, SUITE 710 Address 1605 LBJ FWY, SUITE 710

City-State-Zip: DALLAS TX 75234 City-State-Zip: DALLAS TX 75234

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: VAN VAUGHAN CFO/TREASURER 01/20/2020