#### **2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 800142** 

Entity Name: THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

FILED
Apr 24, 2024
Secretary of State
6531592944CC

# **Current Principal Place of Business:**

751 BROAD ST. NEWARK, NJ 07102

### **Current Mailing Address:**

751 BROAD ST.

NEWARK, NJ 07102 US

FEI Number: 22-1211670 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 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 DIRECTOR Title DIRECTOR

Name CASELLAS, GILBERT FRANK Name HUND-MEJEAN, MARTINA

Address 751 BROAD ST. Address 751 BROAD ST.

City-State-Zip: NEWARK NJ 07102 City-State-Zip: NEWARK NJ 07102

Title DIRECTOR Title DIRECTOR

Name SCOVANNER, DOUGLAS ALLEN Name FALZON, ROBERT M

Address 751 BROAD ST. Address 751 BROAD ST.

City-State-Zip: NEWARK NJ 07102 City-State-Zip: NEWARK NJ 07102

Title DIRECTOR Title DIRECTOR

Name JONES, WENDY Name LOWREY, CHARLES F

Address 751 BROAD ST. Address 751 BROAD ST.

City-State-Zip: NEWARK NJ 07102 City-State-Zip: NEWARK NJ 07102

Title DIRECTOR Title DIRECTOR

Name MURPHY, KATHLEEN ANN Name PIANALTO, SANDRA Address 751 BROAD ST. Address 751 BROAD ST.

City-State-Zip: NEWARK NJ 07102 City-State-Zip: NEWARK NJ 07102

#### 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: MAGGIE PALEN ASST. SECRETARY 04/24/2024

## Officer/Director Detail Continued:

Title DIRECTOR

Name POON, CHRISTINE ANN

Address 751 BROAD ST.

City-State-Zip: NEWARK NJ 07102

Title CONTROLLER

Name AXEL, ROBERT D Address 751 BROAD ST.

City-State-Zip: NEWARK NJ 07102

Title ASST. SECRETARY
Name PALEN, MAGGIE
Address 751 BROAD ST.

City-State-Zip: NEWARK NJ 07102

Title LEAD DIRECTOR

Name TODMAN, MICHAEL ANTONIO

Address 751 BROAD ST.

City-State-Zip: NEWARK NJ 07102

Title PRESIDENT & CHIEF EXECUTIVE

OFFICER

Name LOWREY, CHARLES F

Address 751 BROAD ST.

City-State-Zip: NEWARK NJ 07102