

2023 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 800416

FILED
Aug 01, 2023
Secretary of State
1289153246CC

Entity Name: EQUITABLE FINANCIAL LIFE INSURANCE COMPANY

Current Principal Place of Business:

1345 AVENUE OF THE AMERICAS
NEW YORK, NY 10105

Current Mailing Address:

1345 AVENUE OF THE AMERICAS
NEW YORK, NY 10105 US

FEI Number: 13-5570651

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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 CEO, D
Name PEARSON, MARK
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title PRESIDENT
Name LANE, NICHOLAS B.
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title SECRETARY, CHIEF LEGAL OFFICER
Name GONZALEZ, JOSE R.
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title CFO
Name RAJU, ROBIN M.
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title D
Name HONDAL, FRANCIS S
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title D
Name KAYE, DANIEL
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title D
Name LAMM-TENNANT, JOAN
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title D
Name MATUS, KRISTI
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

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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: FRANCESCA DIVONE

ASSISTANT SECRETARY 08/01/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name SCOTT, BERTRAM L.
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title D
Name STONEHILL, CHARLES G.T.
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title DIRECTOR
Name MACKAY, CRAIG C.
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title D
Name STANSFIELD, GEORGE H.
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title DIRECTOR
Name ISAACS-LOWE, ARLENE
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105

Title ASSISTANT SECRETARY
Name DIVONE, FRANCESCA
Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10105