## **2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 800416** 

Entity Name: EQUITABLE FINANCIAL LIFE INSURANCE COMPANY

FILED
Apr 25, 2023
Secretary of State
9734041906CC

Date

## **Current Principal Place of Business:**

1290 AVENUE OF THE AMERICAS NEW YORK. NY 10104

## **Current Mailing Address:**

1290 AVENUE OF THE AMERICAS NEW YORK, NY 10104 US

FEI Number: 13-5570651 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

Electronic Signature of 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:

Officer/Director Detail:

Title CEO, D Title PRESIDENT

Name PEARSON, MARK Name LANE, NICHOLAS B.

Address 1290 AVENUE OF THE AMERICAS Address 1290 AVENUE OF THE AMERICAS

City-State-Zip: NEW YORK NY 10104 City-State-Zip: NEW YORK NY 10104

Title SEVP, GC, S Title CFO

Name GONZALEZ, JOSE R. Name RAJU, ROBIN M.

Address 1290 AVENUE OF THE AMERICAS Address 1290 AVENUE OF THE AMERICAS

City-State-Zip: NEW YORK NY 10104 City-State-Zip: NEW YORK NY 10104

Title D Title D

Name HONDAL, FRANCIS S Name KAYE, DANIEL

Address 1290 AVENUE OF THE AMERICAS Address 1290 AVENUE OF THE AMERICAS

City-State-Zip: NEW YORK NY 10104 City-State-Zip: NEW YORK NY 10104

Title D Title D

Name LAMM-TENNANT, JOAN Name MATUS, KRISTI

Address 1290 AVENUE OF THE AMERICAS Address 1290 AVENUE OF THE AMERICAS

City-State-Zip: NEW YORK NY 10104 City-State-Zip: NEW YORK NY 10104

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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 04/25/2023

# Officer/Director Detail Continued:

Title D Title D

Name SCOTT, BERTRAM L. Name STANSFIELD, GEORGE H.

Address 1290 AVENUE OF THE AMERICAS Address 1290 AVENUE OF THE AMERICAS

City-State-Zip: NEW YORK NY 10104 City-State-Zip: NEW YORK NY 10104

Title D

Name STONEHILL, CHARLES G.T. Name ISAACS-LOWE, ARLENE

Address 1290 AVENUE OF THE AMERICAS Address 1290 AVENUE OF THE AMERICAS

Title

DIRECTOR

City-State-Zip: NEW YORK NY 10104 City-State-Zip: NEW YORK NY 10104

Title DIRECTOR Title ASSISTANT SECRETARY

Name MACKAY, CRAIG C. Name DIVONE, FRANCESCA

Address 1290 AVENUE OF THE AMERICAS Address 1290 AVENUE OF THE AMERICAS

City-State-Zip: NEW YORK NY 10104 City-State-Zip: NEW YORK NY 10104