

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 800831

Entity Name: SHENANDOAH LIFE INSURANCE COMPANY

Current Principal Place of Business:

2301 BRAMBLETON AVE., S.W.
ROANOKE, VA 24015

Current Mailing Address:

P.O. BOX 12847
ROANOKE, VA 24029

FEI Number: 54-0377280

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 SVP, CHIEF ACTUARY
Name PELTER, MARY ANN
Address 2301 BRAMBLETON AVE., S.W.
City-State-Zip: ROANOKE VA 24015

Title SVP, CFO & TREASURER
Name COFFMAN, MICHAEL W
Address 2301 BRAMBLETON AVE., S.W.
City-State-Zip: ROANOKE VA 24015

Title VP, ISS
Name MOORE, PAULUS W
Address 2301 BRAMBLETON AVE., S.W.
City-State-Zip: ROANOKE VA 24015

Title SVP, GENERAL COUNSEL & SECRETARY
Name KRONAU, KATHLEEN M.
Address 2301 BRAMBLETON AVE., S.W.
City-State-Zip: ROANOKE VA 24015

Title PRESIDENT, CEO
Name CARSTENSEN, HANS L. III
Address 2301 BRAMBLETON AVE., S.W.
City-State-Zip: ROANOKE VA 24015

Title DIRECTOR
Name CARSTENSEN, HANS L. III
Address 2301 BRAMBLETON AVE., S.W.
City-State-Zip: ROANOKE VA 24015

Title DIRECTOR
Name NOVIK, JAY
Address 515 CONGRESS AVE.
SUITE 2220
City-State-Zip: AUSTIN TX 78701

Title DIRECTOR
Name HUFF, CRAIG
Address 650 MADISON AVE
26TH FLOOR
City-State-Zip: NEW YORK NY 10022

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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: KATHLEEN KRONAU

SECRETARY

03/04/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HEIDI, HUTTER
Address 515 CONGRESS AVE.
SUITE 2220
City-State-Zip: AUSTIN TX 78701

Title DIRECTOR
Name POPOLI, MATTHEW
Address 650 MADISON AVE.
26TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name MONTEMAYOR, JOSE
Address 515 CONGRESS AVE.
SUITE 2220
City-State-Zip: AUSTIN TX 78701

Title DIRECTOR
Name ZEITLIN, GREGG
Address 650 MADISON AVE.
26TH FLOOR
City-State-Zip: NEW YORK NY 10022