2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 801519

Entity Name: NORTH AMERICAN COMPANY FOR LIFE AND HEALTH

INSURANCE

Current Principal Place of Business:

8300 MILLS CIVIC PARKWAY WEST DES MOINES, IA 50266

Current Mailing Address:

8300 MILLS CIVIC PARKWAY WEST DES MOINES, IA 50266 US

FEI Number: 36-2428931 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, 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:

Electronic Signature of Registered Agent

Date

FILED Mar 07, 2023

Secretary of State

1024265654CC

Officer/Director Detail:

Title VP, SECRETARY Title CHAIRMAN, DIRECTOR, PRESIDENT

Name HANSEN, BRIAN D Name DINSHAW, ESFANDYAR E Address 8300 MILLS CIVIC PARKWAY Address 8300 MILLS CIVIC PARKWAY City-State-Zip: WEST DES MOINES IA 50266 City-State-Zip: WEST DES MOINES IA 50266

VΡ Title VP, CFO, TREASURER Title Name LYONS, DONALD T Name ATTAWAY, DAVID C

Address 8300 MILLS CIVIC PARKWAY Address 8300 MILLS CIVIC PARKWAY City-State-Zip: WEST DES MOINES IA 50266 City-State-Zip: WEST DES MOINES IA 50266

Title **DIRECTOR** Title DIRECTOR BUNN, WILLARD Name Name ASH, DARRON K Address 125 WACKER DRIVE 5949 SHERRY LANE Address

SUITE 3020 SUITE 1900

City-State-Zip: CHICAGO IL 60606 City-State-Zip: DALLAS TX 75225

Title **DIRECTOR** Title DIRECTOR

CORCORAN, THOMAS J Name Name CLARK, JAMES RODERICK

Address 5949 SHERRY LANE 5949 SHERRY LANE Address

SUITE 1900 SUITE 1900

City-State-Zip: DALLAS TX 75225 City-State-Zip: DALLAS TX 75225

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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.

03/07/2023 SIGNATURE: BRIAN D. HANSEN **SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name FISK, GEORGE A

Address 5949 SHERRY LANE

SUITE 1900

City-State-Zip: DALLAS TX 75225

Title DIRECTOR

Name MASTERSON, MICHAEL M

Address 445 EAST NORTH WATER STREET

UNIT 1405

City-State-Zip: CHICAGO IL 60611

Title DIRECTOR

Name TEKOLSTE, ROBERT R

Address 8300 MILLS CIVIC PARKWAY

City-State-Zip: WEST DES MOINES IA 50266

Title DIRECTOR

Name HEINZ, WILLIAM D

Address 353 NORTH CLARK STREET

City-State-Zip: CHICAGO IL 60654

Title DIRECTOR

Name LOWE, WILLIAM L

Address 8300 MILLS CIVIC PARKWAY

City-State-Zip: WEST DES MOINES IA 50266

Title DIRECTOR

Name DEAKINS, SUSAN T.

Address 129 CHAPEL HILL CIRCLE

City-State-Zip: PAOLI PA 19301