2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816091

Entity Name: TRANSAMERICA PREMIER LIFE INSURANCE COMPANY

FILED Apr 27, 2020 **Secretary of State** 3447312767CC

Current Principal Place of Business:

4333 EDGEWOOD ROAD NE CEDAR RAPIDS. IA 52499

Current Mailing Address:

4333 EDGEWOOD ROAD NE CEDAR RAPIDS. IA 52499 US

FEI Number: 52-0419790 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER PO BOX 6200 (32314-6200) 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	DIRECTOR	Title	DEPUTY SECRETARY
Name	MULLIN, MARK W	Name	MILLER-BREETZ, GREG
Address	4333 EDGEWOOD RD. NE	Address	4333 EDGEWOOD RD. NE
City-State-Zip:	CEDAR RAPIDS IA 52499	City-State-Zip:	CEDAR RAPIDS IA 52499

Title **DIRECTOR** Title TREASURER, DIRECTOR SCHULZ, DAVID Name Name KATWIJK, C. MICHIEL VAN

Address 4333 EDGEWOOD RD NE Address 100 LIGHT STREET FLB1 CEDAR RAPIDS IA 52499 City-State-Zip: City-State-Zip: BALTIMORE MD 21202

DIRECTOR, SECRETARY Title Title PRESIDENT, DIRECTOR

ORLANDI, JAY Name Name BOSTWICK, BLAKE Address 100 LIGHT ST 1801 CALIFORNIA ST Address

SUITE 5200

City-State-Zip: BALTIMORE MD 21202 City-State-Zip: DENVER CO 80202

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: GREGORY E MILLER-BREETZ

DEPUTY SECRETARY

04/27/2020