2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2019
Secretary of State
4631724023CC

DOCUMENT# 818938

Entity Name: WILCO LIFE INSURANCE COMPANY

Current Principal Place of Business:

20 GLOVER AVENUE 4TH FLOOR
NORWALK, CT 06850

Current Mailing Address:

20 GLOVER AVENUE 4TH FLOOR
NORWALK, CT 06850 US

FEI Number: 04-2299444

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
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	CHAIRMAN
Name	STROUP, CHRIS C
Address	20 GLOVER AVENUE 4TH FLOOR
City-State-Zip:	NORWALK CT 06850

Title	CEO
Name	FLEITZ, MICHAEL E
Address	20 GLOVER AVENUE 4TH FLOOR
City-State-Zip:	NORWALK CT 06850

Title	SECRETARY
Name	SARLITTO , MARK R
Address	20 GLOVER AVENUE 4TH FLOOR
City-State-Zip:	NORWALK CT 06850

Title	COO
Name	TREGLIA, ENRICO J
Address	20 GLOVER AVENUE 4TH FLOOR
City-State-Zip:	NORWALK CT 06850

Title	SVP, CFO
Name	LASH, STEVEN D
Address	20 GLOVER AVENUE 4TH FLOOR
City-State-Zip:	NORWALK CT 06850

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: STEVEN LASH — SVP - CFO — 02/06/2019

Electronic Signature of Signing Officer/Director Detail — Date