

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 824962

Entity Name: COMMERCIAL TRAVELERS LIFE INSURANCE COMPANY

Current Principal Place of Business:

2 EAST GILMAN ST
MADISON, WI 53703

FILED
Apr 19, 2022
Secretary of State
7710403094CC

Current Mailing Address:

123 TOWN SQUARE PLACE
PMB 749
JERSEY CITY, NJ 07310 US

FEI Number: 15-0274810

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEBER, EUGENE C
2364 ADDINGTON CIRCLE
ROCKLEDGE, FL 32955 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 PRESIDENT/CHIEF EXECUTIVE OFFICER

Name OLSON, KNUT L

Address 812 LAKEWOOD BLVD.

City-State-Zip: MADISON WI 53704

Title VP, CFO, TREASURER

Name HORBAL, JOHN T

Address 9 ALLEN ST

City-State-Zip: RUMSON NJ 07760

Title DIRECTOR

Name WALSH, DAVID GRAVES

Address 150 E GILMAN ST
STE 5000

City-State-Zip: MADISON WI 53703

Title VP, CHIEF INVESTMENT OFFICER

Name MATSON, TIMOTHY THOMAS

Address 53 CHAMINADE DR.

City-State-Zip: ST. LOUIS MO 63141

Title SECRETARY/GENERAL COUNSEL

Name SHAUL, KIMBERLY A

Address 1173 FARWELL DRIVE

City-State-Zip: MADISON WI 53704

Title APPOINTED ACTUARY

Name MICHELS, SCOTT J

Address 630 S WOODS EDGE DR

City-State-Zip: OREGON WI 53575

Title DIRECTOR

Name WOLTER, GARY JOSEPH

Address 2628 WAUNONA WAY

City-State-Zip: MADISON WI 53713

Title DIRECTOR

Name KRUGER, DAVID W

Address 2325 SUGAR RIVER ROAD

City-State-Zip: VERONA WI 53593

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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: JOHN HORBAL

CFO

04/19/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name BENTLEY, DANNY L
Address 3559 ALTADENA PARK LN
City-State-Zip: VESTAVIA AL 35243

Title DIRECTOR
Name PARKER, RANDY P
Address 131 CHICKERING MEADOWS
City-State-Zip: NASHVILLE TN 37215

Title DIRECTOR
Name SUN, JACK R
Address 75 CLARENDON ST
City-State-Zip: BOSTON MA 02116

Title DIRECTOR
Name AUSTIN, WILLIAM S
Address 5239 HILLTOP RD
City-State-Zip: LONG GROVE IL 60047

Title DIRECTOR
Name POPOLI, MATTHEW T
Address 1045 SEAHAVEN DR
City-State-Zip: MAMARONECK NY 10543