## 2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 825197** 

**Entity Name: BENEFICIAL LIFE INSURANCE COMPANY** 

**Current Principal Place of Business:** 

55 NORTH 300 WEST

SUITE 800

SALT LAKE CITY, UT 84101

**Current Mailing Address:** 

PO BOX 45654

SALT LAKE CITY, UT 84145-0654 US

FEI Number: 87-0115120 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

**FILED** Feb 26, 2025

**Secretary of State** 

9986913702CC

Officer/Director Detail:

Title CEO, DIRECTOR Title PRESIDENT, SECRETARY, DIRECTOR

Name BROWN, THOMAS KIRBY JR Name PEARCE, JOHN D

Address 55 NORTH 300 WEST, SUITE 800 Address 55 NORTH 300 WEST, SUITE 800

SALT LAKE CITY UT 84101 City-State-Zip: City-State-Zip: SALT LAKE CITY UT 84180

Title **DIRECTOR** Title DIRECTOR

MCKINNON, BRADLEY K Name Name CLARKE, ROGER G

55 NORTH 300 WEST Address 55 NORTH 300 WEST Address

SUITE 800 SUITE 800

City-State-Zip: SALT LAKE CITY UT 84180 City-State-Zip: SALT LAKE CITIY UT 84180

Title SVP, CFO, TREASURER DIRECTOR Title BUTLER, SPENCER J Name NYDEGGER, DAVID R Name

55 NORTH 300 WEST, SUITE 800 55 NORTH 300 WEST Address Address

SUITE 800 PO BOX 45654

**SALT LAKE CITY UT 84145-0654** SALT LAKE CITY UT 84180 City-State-Zip: City-State-Zip:

Title Title **DIRECTOR** 

Name WALTER, MARK Name VANCE, SETH W

55 NORTH 300 WEST Address Address 55 NORTH 300 WEST

> SUITE 800 SUITE 800

SALT LAKE CITY UT 84101 City-State-Zip: City-State-Zip: SALT LAKE CITY UT 84180

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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.

02/26/2025 SIGNATURE: SPENCER J BUTLER SVP/CFO/TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title VP Title CHAIRMAN

Name REGIS, LANCE Name SIMPSON, JEFF

Address 55 NORTH 300 WEST Address 55 NORTH 300 WEST

SUITE 800 SUITE 800

City-State-Zip: SALT LAKE CITY UT 84101 City-State-Zip: SALT LAKE CITY UT 84101