

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 827087

FILED
Feb 23, 2023
Secretary of State
2821910472CC

Entity Name: LIFE INSURANCE COMPANY OF THE SOUTHWEST

Current Principal Place of Business:

15455 N. DALLAS PARKWAY
ADDISON, TX 75001

Current Mailing Address:

ONE NATIONAL LIFE DRIVE M500
MONTPELIER, VT 05604

FEI Number: 75-0953004

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INSURANCE COMMISSION
CAPITOL BUILDING
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

Officer/Director Detail :

Title PRESIDENT & CEO, DIRECTOR
Name ASSADI, MEHRAN
Address ONE NATIONAL LIFE DRIVE
City-State-Zip: MONTPELIER VT 05604

Title SECRETARY
Name MULLER, LISA
Address ONE NATIONAL LIFE DRIVE
City-State-Zip: MONTPELIER VT 05604

Title EVP AND COO
Name COTTON, ROBERT E
Address ONE NATIONAL LIFE DR
City-State-Zip: MONTPELIER VT 05604

Title SVP & CIO
Name DOIRON, JASON
Address ONE NATIONAL LIFE DRIVE
City-State-Zip: MONTPELIER VT 05604

Title SVP AND CHIEF RISK OFFICER
Name SANDBERG, ERIC
Address 15455 N. DALLAS PARKWAY
City-State-Zip: ADDISON TX 75001

Title ASST. SECRETARY
Name STAPLES, LINDSAY E
Address ONE NATIONAL LIFE DRIVE M500
City-State-Zip: MONTPELIER VT 05604

Title DIRECTOR
Name MACGOWAN, ELIZABETH
Address ONE NATIONAL LIFE DRIVE M500
City-State-Zip: MONTPELIER VT 05604

Title DIRECTOR
Name COTTON, ROBERT E.
Address ONE NATIONAL LIFE DR
City-State-Zip: MONTPELIER VT 05604

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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: LINDSAY E STAPLES

ASSISTANT SECRETARY 02/23/2023

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MCCRAW, ANGELA
Address ONE NATIONAL LIFE DRIVE M500
City-State-Zip: MONTPELIER VT 05604

Title DIRECTOR
Name BURMESTER, STEPHANIE
Address ONE NATIONAL LIFE DRIVE M500
City-State-Zip: MONTPELIER VT 05604