

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 829359

Entity Name: GERBER LIFE INSURANCE COMPANY

Current Principal Place of Business:

1311 MAMARONECK AVE
WHITE PLAINS, NY 10605

Current Mailing Address:

1311 MAMARONECK AVE
WHITE PLAINS, NY 10605 US

FEI Number: 13-2611847

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 PRESIDENT
Name O'REILLY, KEITH M
Address 1311 MAMARONECK AVE
City-State-Zip: WHITE PLAINS NY 10605

Title SECRETARY
Name GORDON, AYANA Z
Address 1311 MAMARONECK AVE
City-State-Zip: WHITE PLAINS NY 10605

Title CFO, DIRECTOR
Name HOFFMAN, MICHELLE
Address 1311 MAMARONECK AVE
City-State-Zip: WHITE PLAINS NY 10605

Title SVP
Name CONDE, THOMAS
Address 1311 MAMARONECK AVE
City-State-Zip: WHITE PLAINS NY 10605

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: AYANA Z. GORDON

SECRETARY

04/22/2019

Electronic Signature of Signing Officer/Director Detail

Date