2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 835908

Entity Name: COMPANION LIFE INSURANCE COMPANY

Current Principal Place of Business:

1301 GERVAIS STREET SUITE 900

COLUMBIA, SC 29201

Current Mailing Address:

1301 GERVAIS STREET

SUITE 900

COLUMBIA, SC 29201 US

FEI Number: 57-0523959 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: KARL C KEMMERLIN 01/24/2022

Electronic Signature of Registered Agent

Date

FILED Jan 24, 2022

Secretary of State

2886928142CC

Officer/Director Detail:

Title CHAIRMAN Title SECRETARY AND DIRECTOR

Name PANKAU, DAVID S Name MCINTOSH, DUNCAN

Address 1301 GERVAIS STREET Address 1301 GERVAIS STREET

SUITE 900 SUITE 900

City-State-Zip: COLUMBIA SC 29201 City-State-Zip: COLUMBIA SC 29201

Title PRESIDENT AND DIRECTOR Title VP & CFO

Name WILBUR, JOHN Name SILVERS, DIANE

Address 1301 GERVAIS STREET Address 1301 GERVAIS STREET

SUITE 900 SUITE 900

City-State-Zip: COLUMBIA SC 29201 City-State-Zip: COLUMBIA SC 29201

Title CHIEF ACTUARY Title DIRECTOR

Name WILLIAMS, RICKEY C Name SELLERS, M EDWARD

Address 1301 GERVAIS STREET Address 1301 GERVAIS STREET

SUITE 900 SUITE 900

City-State-Zip: COLUMBIA SC 29201 City-State-Zip: COLUMBIA SC 29201

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 SULLIVAN, JOSEPH F
 Name
 DAVIS, JILL R

Address 1301 GERVAIS STREET Address 1301 GERVAIS STREET

SUITE 900 SUITE 900

City-State-Zip: COLUMBIA SC 29201 City-State-Zip: COLUMBIA SC 29201

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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: DIANE SILVERS CFO & VICE-PRESIDENT 01/24/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

MIZEUR, MICHAEL J Name Name MCCORMICK, RENEE S Address 1301 GERVAIS STREET Address 1301 GERVAIS STREET

SUITE 900 SUITE 900

City-State-Zip: COLUMBIA SC 29201 City-State-Zip: COLUMBIA SC 29201

Title DIRECTOR Title **DIRECTOR**

Name GRAVES, W SCOTT Name STINSON, M SHAWN MD

Address 1301 GERVAIS STREET Address 1301 GERVAIS STREET

SUITE 900 SUITE 900

COLUMBIA SC 29201 COLUMBIA SC 29201 City-State-Zip: City-State-Zip:

Title VΡ Title VΡ

ANDERSON, JON C Name FLOCK, MICHAEL D Name

1301 GERVAIS STREET Address 1301 GERVAIS STREET Address

SUITE 900 SUITE 900

COLUMBIA SC 29201 COLUMBIA SC 29201 City-State-Zip: City-State-Zip:

VΡ Title VΡ Title

FOLSOM, J ANDERSON Name SMIDT, MARK R Name

Address 1301 GERVAIS STREET Address 1301 GERVAIS STREET SUITE 900 SUITE 900

City-State-Zip: COLUMBIA SC 29201 City-State-Zip: COLUMBIA SC 29201

Title **TREASURER** Title ASST. TREASURER DUBOIS, ANTHONY F Name HAIR, LORI C Name

1301 GERVAIS STREET Address 1301 GERVAIS STREET Address

> SUITE 900 SUITE 900

City-State-Zip: COLUMBIA SC 29201 City-State-Zip: COLUMBIA SC 29201

ASST. SECRETARY Title **AUDIT & COMPLIANCE OFFICER** Title

EARLY, JAMIE I MCELVEEN, LOUIS M Name Name

1301 GERVAIS STREET Address 1301 GERVAIS STREET Address

SUITE 900 SUITE 900

COLUMBIA SC 29201 COLUMBIA SC 29201 City-State-Zip: City-State-Zip: