

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837255

Entity Name: VOYA RETIREMENT INSURANCE AND ANNUITY COMPANY**Current Principal Place of Business:**ONE ORANGE WAY
WINDSOR, CT 06095**Current Mailing Address:**5780 POWERS FERRY ROAD NW
ATLANTA, GA 30327 US**FEI Number:** 71-0294708**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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 ASST. SECRETARY
Name SCHULTZ, TINA
Address 250 MARQUETTE AVE., SUITE 900
City-State-Zip: MINNEAPOLIS MN 55401

Title SENIOR VICE PRESIDENT, CHIEF
ACCOUNTING OFFICER
Name OH, TONY
Address 5780 POWERS FERRY ROAD NW
City-State-Zip: ATLANTA GA 30327

Title SECRETARY
Name O'DONNELL, MELISSA
Address 250 MARQUETTE AVE., SUITE 900
City-State-Zip: MINNEAPOLIS MN 55401

Title CFO, DIRECTOR, SENIOR VICE
PRESIDENT
Name KATZ, MICHAEL
Address 230 PARK AVENUE
City-State-Zip: NEW YORK NY 10169

Title SENIOR VICE PRESIDENT,
DIRECTOR, CRO
Name O'NEILL, FRANCIS G.
Address ONE ORANGE WAY
City-State-Zip: WINDSOR CT 06095

Title SENIOR VICE PRESIDENT
Name TOMS, MATTHEW
Address 5780 POWERS FERRY ROAD NW
City-State-Zip: ATLANTA GA 30327

Title SVP, APPOINTED ACTUARY
Name PUFFER, KYLE
Address ONE ORANGE WAY
City-State-Zip: WINDSOR CT 06095

Title DIRECTOR, PRESIDENT
Name VAILLANCOURT, AMELIA (AMY)
Address ONE ORANGE WAY
City-State-Zip: WINDSOR CT 06095

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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: TINA SCHULTZ**ASSISTANT SECRETARY** 01/07/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ZIELKE, MONA
Address 250 MARQUETTE AVE., SUITE 900
City-State-Zip: MINNEAPOLIS MN 55401

Title SVP, TREASURER
Name LUK, MICHELLE
Address 230 PARK AVENUE
City-State-Zip: NEW YORK NY 10169

Title DIRECTOR
Name BLAL, YOUSSEF
Address 250 MARQUETTE AVE., SUITE 900
City-State-Zip: MINNEAPOLIS MN 55401

Title VP
Name GRUENBERG, GAVIN
Address ONE ORANGE WAY
City-State-Zip: WINDSOR CT 06095

Title VP
Name LINNEY, DAVID
Address 2925 RICHMOND AVE, SUITE 1200
City-State-Zip: HOUSTON TX 77098

Title EVP, CHIEF LEGAL OFFICER
Name TO, MY CHI
Address 230 PARK AVENUE
City-State-Zip: NEW YORK NY 10169

Title CHIEF INFORMATION SECURITY
OFFICER
Name MONTI, JR., MARINO
Address ONE ORANGE WAY
City-State-Zip: WINDSOR CT 06095

Title DIRECTOR
Name JAIN, NEHA
Address 230 PARK AVENUE
City-State-Zip: NEW YORK NY 10169

Title VP
Name JACKOWITZ, MARK
Address ONE ORANGE WAY
City-State-Zip: WINDSOR CT 06095

Title VP
Name MULRY, BONNIE
Address ONE ORANGE WAY
City-State-Zip: WINDSOR CT 06095