

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 849616

**Entity Name:** IA AMERICAN LIFE INSURANCE COMPANY

**Current Principal Place of Business:**

425 AUSTIN AVENUE  
WACO, TX 76701

**Current Mailing Address:**

PO BOX 2549  
WACO, TX 76702 US

**FEI Number:** 13-3036472

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
PO BOX 6200 (32314-6200)  
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:** DARLA A. SCHAFFER

01/11/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name STICKNEY, MICHAEL L MR.  
Address 17550 NORTH PERIMETER DRIVE,  
#210  
City-State-Zip: SCOTTSDALE AZ 85255

Title SECRETARY  
Name PEDELTY, JOSHUA R  
Address 425 AUSTIN AVENUE  
City-State-Zip: WACO TX 76701

Title CFO  
Name SCHAFFER, DARLA A MS.  
Address 425 AUSTIN AVENUE  
City-State-Zip: WACO TX 76701

Title PRESIDENT  
Name DUNLAP, JOE W MR.  
Address 425 AUSTIN AVENUE  
City-State-Zip: WACO TX 76701

*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:** DARLA A. SCHAFFER

**EVP, CFO & TREASURER** 01/11/2021

Electronic Signature of Signing Officer/Director Detail

Date