

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 855868

**Entity Name:** METROPOLITAN TOWER LIFE INSURANCE COMPANY**Current Principal Place of Business:**200 PARK AVENUE  
NEW YORK, NY 10166**Current Mailing Address:**11330 OLIVE BLVD  
6-B106  
ST. LOUIS, MO 63141 US**FEI Number:** 13-3114906**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 SR VP  
Name PINA, JEANNETTE  
Address 200 PARK AVENUE  
City-State-Zip: NEW YORK NY 10166

Title VP, TREASURER  
Name CONNERY, CHARLES  
Address ONE METLIFE WAY  
City-State-Zip: WHIPPANY NJ 07981

Title PRESIDENT, DIRECTOR, CHAIRMAN  
Name COX, GRAHAM  
Address 501 ROUTE 22  
City-State-Zip: BRIDGEWATER NJ 08807

Title ASST. SECRETARY  
Name WEBER, MICHELE  
Address 200 PARK AVENUE  
City-State-Zip: NEW YORK NY 10166

Title VP  
Name KLOTZBACH, MICHELLE  
Address 11330 OLIVE BLVD  
6-B106  
City-State-Zip: ST LOUIS MO 63141

Title ASST. TREASURER, ASST VP  
Name LENAHA, THOMAS  
Address ONE METLIFE WAY  
City-State-Zip: WHIPPANY NJ 07981

Title SECRETARY  
Name BUFORD, KELLI  
Address 200 PARK AVENUE  
City-State-Zip: NEW YORK NY 10166

Title DIRECTOR, EXEC VP  
Name ZARCONI, MICHAEL  
Address 111 WASHINGTON AVE.  
SUITE 300  
City-State-Zip: ALBANY NY 12210

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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:** MICHELLE KLOTZBACH

VICE PRESIDENT

04/26/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title               DIRECTOR  
Name               MACKAY, KEVIN  
Address            200 PARK AVENUE  
City-State-Zip:    NEW YORK NY 10166

Title               SR VP, ASST. SECRETARY  
Name               RING, TIMOTHY  
Address            200 PARK AVENUE  
City-State-Zip:    NEW YORK NY 10166

Title               SR VP  
Name               BELCHER, STEVEN  
Address            200 PARK AVENUE  
City-State-Zip:    NEW YORK NY 10166

Title               CFO  
Name               GORDON, KIM  
Address            200 PARK AVENUE  
City-State-Zip:    NEW YORK NY 10166