

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07552

Entity Name: FORETHOUGHT LIFE INSURANCE COMPANY**Current Principal Place of Business:**10 WEST MARKET STREET
SUITE 2300
INDIANAPOLIS, IN 46204**Current Mailing Address:**10 WEST MARKET STREET
SUITE 2300
INDIANAPOLIS, IN 46204 US**FEI Number:** 06-1016329**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	VP
Name	VYNALEK, RICHARD
Address	10 WEST MARKET STREET SUITE 2300
City-State-Zip:	INDIANAPOLIS IN 46204

Title	VP
Name	KRISHNAN, LAKSHMI
Address	10 WEST MARKET STREET SUITE 2300
City-State-Zip:	INDIANAPOLIS IN 46204

Title	DIRECTOR
Name	JACOBY, DAVID ALLEN
Address	10 WEST MARKET STREET SUITE 2300
City-State-Zip:	INDIANAPOLIS IN 46204

Title	VP
Name	MULDOON, JAMIE
Address	10 WEST MARKET STREET SUITE 2300
City-State-Zip:	INDIANAPOLIS IN 46204

Title	VP
Name	DEMAYO, EILEEN
Address	10 WEST MARKET STREET SUITE 2300
City-State-Zip:	INDIANAPOLIS IN 46204

Title	VP
Name	MAXWELL, TONYA RACHELLE
Address	10 WEST MARKET STREET SUITE 2300
City-State-Zip:	INDIANAPOLIS IN 46204

Title	VP
Name	KOHRMAN, DEBORAH
Address	10 WEST MARKET STREET SUITE 2300
City-State-Zip:	INDIANAPOLIS IN 46204

Title	VP
Name	KIMMERLING, KEVIN MICHAEL
Address	10 WEST MARKET STREET SUITE 2300
City-State-Zip:	INDIANAPOLIS IN 46204

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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: FREUND, KATHRYN LAUREN**SECRETARY****03/06/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WILKEN, DAVID PAUL
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR
Name ARENA, JR, ROBERT MICHAEL
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204

Title MANAGING DIRECTOR
Name HECHT, JONATHAN
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR
Name LEE, HANBEN KIM
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204

Title SECRETARY
Name FREUND, KATHRYN LAUREN
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204

Title VP
Name WINICK, ALICIA
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204

Title CFO
Name JACOBY, DAVID ALLEN
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204

Title PRESIDENT
Name ARENA, JR, ROBERT MICHAEL
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR
Name TODD, ERIC DAVID
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204

Title VP
Name WEISS, DAVID LEE
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204

Title VP
Name COX, MARVIN
Address 10 WEST MARKET STREET
SUITE 2300
City-State-Zip: INDIANAPOLIS IN 46204