2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12054

Entity Name: ACCORDIA LIFE AND ANNUITY COMPANY

Current Principal Place of Business:

215 10TH STREET SUITE 1100

DES MOINES, IA 50309

Current Mailing Address:

215 10TH STREET SUITE 1100

DES MOINES, IA 50309 US

FEI Number: 95-2496321 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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: JAMES HALPIN, ASSISTANT SECRETARY

Electronic Signature of Registered Agent

04/22/2021 Date

FILED Apr 22, 2021

Secretary of State

9876167746CC

Officer/Director Detail:

Title DIRECTOR Title VP

NameJACOBY, DAVID ALLENNameGREENHUT, ADAMAddress215 10TH STREETAddress215 10TH STREET

SUITE 1100 SUITE 1100

JITE 1100 SUITE 110

City-State-Zip: DES MOINES IA 50309 City-State-Zip: DES MOINES IA 50309

Title VP Title VP

Name MULDOON, JAMIE Name BERNLOHR, KURT

Address 215 10TH STREET Address 215 10TH STREET SUITE 1100 SUITE 1100

City-State-Zip: DES MOINES IA 50309 City-State-Zip: DES MOINES IA 50309

Title ASSISTANT SECRETARY Title DIRECTOR

Name KIMMERLING, KEVIN MICHAEL Name ARENA, JR., ROBERT MICHAEL

Address 215 10TH STREET Address 215 10TH STREET

SUITE 1100 SUITE 1100

City-State-Zip: DES MOINES IA 50309 City-State-Zip: DES MOINES IA 50309

Title DIRECTOR Title TREASURER

Name LEE, HANBEN KIM Name JACOBY, DAVID ALLEN

Address 215 10TH STREET Address 215 10TH STREET

SUITE 1100 SUITE 1100

City-State-Zip: DES MOINES IA 50309 City-State-Zip: DES MOINES IA 50309

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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: JAMIE MULDOON VICE PRESIDENT 04/22/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title **DIRECTOR** Title

Name WAGNER, NATALIE ROSE Name TODD. ERIC DAVID 215 10TH STREET Address 215 10TH STREET Address

SUITE 1100 SUITE 1100

DES MOINES IA 50309 City-State-Zip: DES MOINES IA 50309 City-State-Zip:

VΡ Title Title VΡ

WEISS, DAVID LEE Name MAXWELL, TONYA RACHELLE Name

Address 215 10TH STREET Address 215 10TH STREET

SUITE 1100 SUITE 1100

DES MOINES IA 50309 DES MOINES IA 50309 City-State-Zip: City-State-Zip:

Title ASSISTANT SECRETARY Title **DIRECTOR**

WILKEN, DAVID PAUL BERNLOHR, KURT Name Name 215 10TH STREET Address 215 10TH STREET Address

SUITE 1100

SUITE 1100

DES MOINES IA 50309 City-State-Zip: City-State-Zip: DES MOINES IA 50309

VΡ Title **ASSISTANT SECRETARY** Title

Name KRISHNAN, LAKSHMI Name JOHNSON, VIRGINIA HOPE

Address 215 10TH STREET Address 215 10TH STREET

SUITE 1100 SUITE 1100

City-State-Zip: DES MOINES IA 50309 City-State-Zip: DES MOINES IA 50309

Title **SECRETARY** Title VΡ

Name FREUND, KATHRYN LAUREN Name COX, MARVIN

215 10TH STREET 215 10TH STREET Address Address

> **SUITE 1100 SUITE 1100**

City-State-Zip: DES MOINES IA 50309 City-State-Zip: DES MOINES IA 50309

PRESIDENT Title VΡ Title

ARENA, JR, ROBERT MICHAEL VYNALEK, RICHARD Name Name 215 10TH STREET 215 10TH STREET

Address Address **SUITE 1100 SUITE 1100**

City-State-Zip: DES MOINES IA 50309 City-State-Zip: DES MOINES IA 50309

Title **PRESIDENT** Title VΡ

Name WILKEN, DAVID PAUL Name NELSON, BRYAN EDWARD

215 10TH STREET 215 10TH STREET Address Address

SUITE 1100 SUITE 1100

City-State-Zip: DES MOINES IA 50309 City-State-Zip: DES MOINES IA 50309