

2020 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

05/29/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name VYNALEK, RICHARD
Address 215 10TH STREET
SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title VP
Name WAGNER, NATALIE ROSE
Address 215 10TH STREET
SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title DIRECTOR
Name WILKEN, DAVID PAUL
Address 215 10TH STREET
SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title PRESIDENT
Name WILKEN, DAVID PAUL
Address 215 10TH STREET
SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title DIRECTOR
Name ARENA JR., ROBERT MICHAEL
Address 215 10TH STREET
SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title CEO
Name ARENA JR., ROBERT MICHAEL
Address 215 10TH STREET
SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title VP
Name BERNLOHR, KURT
Address 215 10TH STREET
SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title VP
Name DORUSKA, THOMAS
Address 215 10TH STREET
SUITE 1100
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: VIRGINIA HOPE JOHNSON

SECRETARY

05/29/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name GIAMALIS, JOHN NICHOLAS
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title DIRECTOR
Name JACOBY, DAVID ALLEN
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title SECRETARY
Name JOHNSON, VIRGINIA HOPE
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title VP
Name LASICK, DONNA
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title DIRECTOR
Name LEE, HANBEN KIM
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title VP
Name MULDOON, JAMIE
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title DIRECTOR
Name TODD, ERIC DAVID
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title VP
Name GREENHUT, ADAM
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title CFO
Name JACOBY, DAVID ALLEN
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title VP
Name KRISHNAN, LAKSHMI
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title VP
Name LEAVEY, KEVIN F.
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title VP
Name MAXWELL, TONYA RACHELLE
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309

Title VP
Name NELSON, BRYAN EDWARD
Address 215 10TH STREET
 SUITE 1100
City-State-Zip: DES MOINES IA 50309