

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 805208

**Entity Name:** CMFG LIFE INSURANCE COMPANY

**Current Principal Place of Business:**

5910 MINERAL POINT ROAD  
MADISON, WI 53705

**Current Mailing Address:**

5910 MINERAL POINT ROAD  
MADISON, WI 53705 US

**FEI Number:** 39-0230590

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY, SVP, CHIEF GOVERNANCE OFFICER.  
Name SULESKI, STEVEN R.  
Address 5910 MINERAL POINT ROAD  
City-State-Zip: MADISON WI 53705

Title TREASURER, EVP, CFO, DIRECTOR  
Name SHORE, ALASTAIR C.  
Address 5910 MINERAL POINT ROAD  
City-State-Zip: MADISON WI 53705

Title PRESIDENT & CEO, CHAIRMAN OF THE BOARD, DIRECTOR  
Name TRUNZO, ROBERT  
Address 5910 MINERAL POINT ROAD  
City-State-Zip: MADISON WI 53705

Title EVP, CHIEF INVESTMENT OFFICER, DIRECTOR  
Name MARKS, DAVID P.  
Address 5910 MINERAL POINT ROAD  
City-State-Zip: MADISON WI 53705

Title EVP, CHIEF ADMINISTRATIVE OFFICER, DIRECTOR  
Name PATZNER, FAYE A.  
Address 5910 MINERAL POINT ROAD  
City-State-Zip: MADISON WI 53705

Title EVP, CHIEF PRODUCTS OFFICER, VC, DIRECTOR  
Name POWER, JAMES M.  
Address 5910 MINERAL POINT ROAD  
City-State-Zip: MADISON WI 53705

*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:** STEVEN R.SULESKI

**SECRETARY**

**04/16/2015**

Electronic Signature of Signing Officer/Director Detail

Date