

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 814485

**FILED**  
**Mar 25, 2016**  
**Secretary of State**  
**CC3966846909**

**Entity Name:** FIDELITY & GUARANTY LIFE INSURANCE COMPANY

**Current Principal Place of Business:**

TWO RUAN CENTER  
601 LOCUST STREET 14TH FLOOR  
DES MOINES, IA 50309

**Current Mailing Address:**

TWO RUAN CENTER  
601 LOCUST STREET 14TH FLOOR  
DES MOINES, IA 50309 US

**FEI Number:** 52-6033321

**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            PRESIDENT, CEO  
Name            LITTLEFIELD, CHRISTOPHER J.  
Address        TWO RUAN CENTER  
                  601 LOCUST STREET 14TH FLOOR  
City-State-Zip: DES MOINES IA 50309

Title            EVP, CFO  
Name            VIGNEAU, DENNIS ROBERT  
Address        TWO RUAN CENTER  
                  601 LOCUST STREET 14TH FLOOR  
City-State-Zip: DES MOINES IA 50309

Title            EVP, SECRETARY  
Name            MARHOUN, ERIC LUND  
Address        TWO RUAN CENTER  
                  601 LOCUST STREET 14TH FLOOR  
City-State-Zip: DES MOINES IA 50309

Title            TREASURER, ASST. VP  
Name            SMITH, CLAIRE M  
Address        TWO RUAN CENTER  
                  601 LOCUST STREET 14TH FLOOR  
City-State-Zip: DES MOINES IA 50309

Title            DIRECTOR  
Name            BAWDEN, WILLIAM J  
Address        TWO RUAN CENTER  
                  601 LOCUST STREET 14TH FLOOR  
City-State-Zip: DES MOINES IA 50309

Title            DIRECTOR  
Name            ASALI, OMAR MARWAN  
Address        TWO RUAN CENTER  
                  601 LOCUST STREET 14TH FLOOR  
City-State-Zip: DES MOINES IA 50309

Title            DIRECTOR  
Name            GREGSON, KEVIN J  
Address        TWO RUAN CENTER  
                  601 LOCUST STREET 14TH FLOOR  
City-State-Zip: DES MOINES IA 50309

Title            DIRECTOR  
Name            MELCHIONNI, WILLIAM P  
Address        TWO RUAN CENTER  
                  601 LOCUST STREET 14TH FLOOR  
City-State-Zip: DES MOINES IA 50309

**Continues on page 2**

*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:** ERIC L. MARHOUN

**SECRETARY**

**03/25/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name WILLIAMS, THOMAS A  
Address TWO RUAN CENTER  
601 LOCUST STREET 14TH FLOOR  
City-State-Zip: DES MOINES IA 50309

Title DIRECTOR  
Name TWEEDIE, LEMUEL JOHN H  
Address TWO RUAN CENTER  
601 LOCUST STREET 14TH FLOOR  
City-State-Zip: DES MOINES IA 50309