

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 814485

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

**Current Principal Place of Business:**

801 GRAND AVENUE  
SUITE 2600  
DES MOINES, IA 50309

**Current Mailing Address:**

801 GRAND AVENUE  
SUITE 2600  
DES MOINES, IA 50309 US

**FEI Number:** 52-6033321

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 32399-0000 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            BLUNT, CHRISTOPHER O.  
Address        801 GRAND AVENUE  
                  SUITE 2600  
City-State-Zip: DES MOINES IA 50309

Title            EVP, CFO  
Name            YOUNG, WENDY J.B.  
Address        801 GRAND AVENUE  
                  SUITE 2600  
City-State-Zip: DES MOINES IA 50309

Title            SVP, SECRETARY  
Name            HYDE, JODI  
Address        801 GRAND AVENUE  
                  SUITE 2600  
City-State-Zip: DES MOINES IA 50309

Title            TREASURER, VP  
Name            EARLEY, JOSEPH  
Address        801 GRAND AVENUE  
                  SUITE 2600  
City-State-Zip: DES MOINES IA 50309

Title            DIRECTOR  
Name            BLUNT, CHRISTOPHER O.  
Address        801 GRAND AVENUE  
                  SUITE 2600  
City-State-Zip: DES MOINES IA 50309

Title            DIRECTOR  
Name            YOUNG, WENDY J.B.  
Address        801 GRAND AVENUE  
                  SUITE 2600  
City-State-Zip: DES MOINES IA 50309

Title            DIRECTOR  
Name            PARK, ANTHONY J  
Address        801 GRAND AVENUE  
                  SUITE 2600  
City-State-Zip: DES MOINES IA 50309

Title            DIRECTOR  
Name            QUIRK, RAYMOND R  
Address        801 GRAND AVENUE  
                  SUITE 2600  
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:** TESSA CANTONWINE

**ASSISTANT SECRETARY    05/02/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            NOLAN, MICHAEL J  
Address        801 GRAND AVENUE  
                 SUITE 2600  
City-State-Zip: DES MOINES IA 50309

Title            ASSISTANT SECRETARY  
Name            CANTONWINE, TESSA  
Address        801 GRAND AVENUE  
                 SUITE 2600  
City-State-Zip: DES MOINES IA 50309