

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 814485

Entity Name: FIDELITY & GUARANTY LIFE INSURANCE COMPANY

FILED
May 01, 2023
Secretary of State
8433394981CC

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 AHLMAN, JODI
Address 801 GRAND AVENUE
 SUITE 2600
City-State-Zip: DES MOINES IA 50309

Title TREASURER, VP
Name WILTSE, MARK
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 05/01/2023

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