## 2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 828190

#### Entity Name: DELAWARE LIFE INSURANCE COMPANY

### **Current Principal Place of Business:**

1601 TRAPELO ROAD, SUITE 30 WALTHAM, MA 02451

## **Current Mailing Address:**

1601 TRAPELO ROAD, SUITE 30 WALTHAM, MA 02451 US

## FEI Number: 04-2461439

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

CHIEF FINANCIAL OFFICER 200 E. GAINES STREET TALLAHASSEE, FL 32399-0000 US FILED Jan 11, 2021 Secretary of State 6836008221CC

Date

Certificate of Status Desired: No

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

### Officer/Director Detail :

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Title	SVP AND GENERAL COUNSEL AND SECRETARY	Title	SVP AND CHIEF ACCOUNTING OFFICER AND TREASURER
Name	BLOOM, MICHAEL S	Name	MORAN, MICHAEL K
Address	1601 TRAPELO ROAD, SUITE 30	Address	1601 TRAPELO ROAD, SUITE 30
City-State-Zip:	WALTHAM MA 02451	City-State-Zip:	WALTHAM MA 02451
Title Name Address	DIRECTOR AND CHAIRMAN SAMS, JR. , DAVID E 1601 TRAPELO ROAD, SUITE 30	Title Name Address	DIRECTOR, CEO AND PRESIDENT TOWRISS, DANIEL J 1601 TRAPELO ROAD, SUITE 30
City-State-Zip:	WALTHAM MA 02451	City-State-Zip:	WALTHAM MA 02451
Title Name	COO PURVIS, JAMES D	Title Name	SVP, INFORMATION TECHNOLOGY AND OPERATIONS STANTON, ROBERT B
Address	1601 TRAPELO ROAD, SUITE 30	Address	1601 TRAPELO ROAD, SUITE 30
City-State-Zip:	WALTHAM MA 02451	City-State-Zip:	WALTHAM MA 02451
Title Name Address City-State-Zip:	SVP, HUMAN RESOURCES WILCON, MICHELLE B 1601 TRAPELO ROAD, SUITE 30 WALTHAM MA 02451	Title Name Address City-State-Zip:	CHIEF INVESTMENT OFFICER KENNEY, ANDREW F 1601 TRAPELO ROAD, SUITE 30 WALTHAM MA 02451

#### 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: MICHAEL S. BLOOM

SECRETARY

01/11/2021

Electronic Signature of Signing Officer/Director Detail

# **Officer/Director Detail Continued :**

City-State-Zip: WALTHAM MA 02451

Address

1601 TRAPELO ROAD, SUITE 30

Title	DIRECTOR	Title	SVP, CHIEF ACTUARY
Name	CULLEN, DENNIS A	Name	AKIN, VICTOR A
Address	1601 TRAPELO ROAD, SUITE 30	Address	1601 TRAPELO ROAD, SUITE 30
City-State-Zip:	WALTHAM MA 02451	City-State-Zip:	WALTHAM MA 02451
Title	CEO		
Title	GFU		
Name	WANG, FANG LINDA		