

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 830580

**Entity Name:** JOHN ALDEN LIFE INSURANCE COMPANY**Current Principal Place of Business:**21600 OXNARD STREET, SUITE 1500  
WOODLAND HILLS, CA 91367**Current Mailing Address:**21600 OXNARD STREET, SUITE 1500  
WOODLAND HILLS, CA 91367 US**FEI Number:** 41-0999752**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** JEANNIE AMY ARAGON-CRUZ

08/02/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HUGHES, ALAN S.  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title VP  
Name GARVEY, ALTHEA E.  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title VP  
Name CHEUNG-YAN HUNG, DAVID  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title PRESIDENT, DIRECTOR  
Name GLICKMAN, JAMES M.  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title VP, DIRECTOR  
Name PETERS, JAY R.  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title VP  
Name ROGERS, JIMMY DALE  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title SECRETARY, GENERAL COUNSEL,  
SENIOR VICE PRESIDENT  
Name GOMEZ, JORGE  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title TREASURER, SENIOR VICE  
PRESIDENT, CFO  
Name SORICE, JULIANNE  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

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*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:** JORGE GOMEZ**SECRETARY**

08/02/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SHEARBURN, KIRK R.  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title VP  
Name SEEMAN, NORMAN  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR  
Name COHEN, SETH L.  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR  
Name GLICKMAN, MARLENE GONIK  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367

Title VP, SENIOR VICE PRESIDENT  
Name DIFFLEY, PETER  
Address 21600 OXNARD STREET, SUITE 1500  
City-State-Zip: WOODLAND HILLS CA 91367