2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2024
Secretary of State
4959939488CC

DOCUMENT# P17692

Entity Name: STARMOUNT LIFE INSURANCE COMPANY

Current Principal Place of Business:

8485 GOODWOOD BLVD.
BATON ROUGE, LA 70806

Current Mailing Address:

1 FOUNTAIN SQUARE
CHATTANOOGA, TN 37402 US

FEI Number: 72-0977315

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
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	EVP, DIRECTOR
Name	ARNOLD, TIMOTHY G.
Address	1200 COLONIAL LIFE BOULEVARD
City-State-Zip:	COLUMBIA SC 29210

Title	EVP, GENERAL COUNSEL, DIRECTOR
Name	IGLESIAS, LISA G.
Address	1 FOUNTAIN SQUARE
City-State-Zip:	CHATTANOOGA TN 37402

Title	VP, TREASURER
Name	KATZ, BENJAMIN S.
Address	1 FOUNTAIN SQUARE
City-State-Zip:	CHATTANOOGA TN 37402

Title	SVP, CHIEF ACCOUNTING OFFICER
Name	RICE, WALTER LYNN JR.
Address	1 FOUNTAIN SQUARE
City-State-Zip:	CHATTANOOGA TN 37402

Title	EVP, CHIEF INFORMATION AND DIGITAL OFFICER, DIRECTOR
Name	BHASIN, PUNEET
Address	1 FOUNTAIN SQUARE
City-State-Zip:	CHATTANOOGA TN 37402

Title	VP, MANAGING COUNSEL AND CORPORATE SECRETARY
Name	JULLIENNE, JEAN PAUL
Address	1 FOUNTAIN SQUARE
City-State-Zip:	CHATTANOOGA TN 37402

Title	EVP, FINANCE, DIRECTOR
Name	ZABEL, STEVEN A.
Address	1 FOUNTAIN SQUARE
City-State-Zip:	CHATTANOOGA TN 37402

Title	SVP, GLOBAL FINANCIAL PLANNING AND ANALYSIS, DIRECTOR
Name	WAXENBERG, DANIEL J.
Address	1 FOUNTAIN SQUARE
City-State-Zip:	CHATTANOOGA TN 37402

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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: JEAN PAUL JULLIENNE — VP, MANAGING COUNSEL & CORPORATE SECRETARY — 04/16/2024

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR, CHAIRMAN, PRESIDENT, CEO
Name	PYNE, CHRISTOPHER W.
Address	2211 CONGRESS STREET
City-State-Zip:	PORTLAND ME 04122

Title	DIRECTOR
Name	LEIPER, MARTHA D.
Address	1 FOUNTAIN SQUARE
City-State-Zip:	CHATTANOOGA TN 37321