

SCC eFile

2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

212520238

1.) CORPORATION NAME:

**Athene Annuity & Life Assurance Company**

DUE DATE: **5/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor  
1111 East Main Street**

SCC ID NO: **F0083743**

**RICHMOND, VA 23219**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,321,678

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P O BOX 1389

CITY/ST/ZIP: GREENVILLE, SC 29602-1389

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: GUY H SMITH III  
 TITLE: PRESIDENT  
 ADDRESS: 2600 WADE HAMPTON BLVD  
 CITY/ST/ZIP/CO: GREENVILLE, SC 29615

OFFICER

DIRECTOR

NAME: DAVID ATTAWAY  
 TITLE: VP/T  
 ADDRESS: 2000 WADE HAMPTON BLVD  
 CITY/ST/ZIP/CO: GREENVILLE, SC 29615

OFFICER

DIRECTOR

NAME: JOHN L GOLDEN  
 TITLE: SECRETARY  
 ADDRESS: 818 MANHATTAN BEACH BLVD  
 SUITE 100  
 CITY/ST/ZIP/CO: MANHATTAN BEACH, CA 90266

OFFICER

DIRECTOR

NAME: IMRAN SIDDIQUI  
 TITLE: DIRECTOR  
 ADDRESS: 2000 WADE HAMPTON BLVD  
 CITY/ST/ZIP/CO: GREENVILLE, SC 29615

OFFICER

DIRECTOR

NAME: James R Belardi  
 TITLE: CEO  
 ADDRESS: 818 Manhattan Beach Blvd  
 Suite 100  
 CITY/ST/ZIP/CO: Manhattan Beach, CA 90266

OFFICER

DIRECTOR

NAME: MATTHEW R MICHELINI  
 TITLE: DIRECTOR  
 ADDRESS: 2000 WADE HAMPTON BLVD  
 CITY/ST/ZIP/CO: GREENVILLE, SC 29615

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN F BRESNAHAN DIRECTOR 2000 WADE HAMPTON BLVD GREENVILLE, SC 29615	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES ANDREW BETTS DIRECTOR 2000 WADE HAMPTON BLVD GREENVILLE, SC 29615	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANCIS P SABATINI DIRECTOR 2000 WADE HAMPTON BLVD GREENVILLE, SC 29615	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HOPE SCHEFLER TAITZ DIRECTOR 2000 WADE HAMPTON BLVD GREENVILLE, SC 29615	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GUY H SMITH III SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GUY H SMITH III, PRESIDENT PRINTED NAME AND CORPORATE TITLE	5/30/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			