

1.) CORPORATION NAME: Securian Life Insurance Company	DUE DATE: 8/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA	SCC ID NO: F0413213				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>5,000,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000,000
CLASS	AUTHORIZED				
COMMON	5,000,000				
4.) STATE OR COUNTRY OF INCORPORATION: MN					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 400 N ROBERT ST
CITY/ST/ZIP: ST PAUL, MN 55101

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: ROBERT L SENKLER TITLE: PRES/CEO ADDRESS: 400 N ROBERT STREET CITY/ST/ZIP/CO: ST PAUL, MN 55101	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: GARY R CHRISTENSEN TITLE: VICE PRESIDENT ADDRESS: 400 ROBERT ST N CITY/ST/ZIP/CO: ST. PAUL, MN 55101	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: CHRISTOPHER M HILGER TITLE: VICE PRESIDENT ADDRESS: 400 ROBERT ST N CITY/ST/ZIP/CO: ST. PAUL, MN 55101	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: BRUCE P SHAY TITLE: VICE PRESIDENT ADDRESS: 400 ROBERT ST N CITY/ST/ZIP/CO: ST. PAUL, MN 55101	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: WARREN J ZACCARO TITLE: EVP/CFO ADDRESS: 400 ROBERT ST N CITY/ST/ZIP/CO: ST PAUL, MN 55101	<input checked="" 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/ ROBERT L SENKLER	ROBERT L SENKLER, PRES/CEO	7/14/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.