



FILED

MAY 24 2023

INSURANCE REGULATION
Docketed by: 04

OFFICE OF INSURANCE REGULATION

MICHAEL YAWORSKY
COMMISSIONER

IN THE MATTER OF:

CASE NO.: 303853-22-CO

**EMPOWER ANNUITY INSURANCE
COMPANY OF AMERICA**

CONSENT ORDER

THIS CAUSE came on for consideration upon the filing of a request by EMPOWER ANNUITY INSURANCE COMPANY OF AMERICA ("EMPOWER ANNUITY"), which was formerly known as Great-West Life & Annuity Insurance Company ("Great-West Life"), to use previously approved Great-West Life forms with the new name without re-filing same for approval pursuant to Section 627.410, Florida Statutes. Following a complete review of the entire record, and upon consideration thereof, and being otherwise fully advised in the premises, the FLORIDA OFFICE OF INSURANCE REGULATION ("OFFICE"), hereby finds as follows:

1. The OFFICE has jurisdiction over the subject matter and the parties herein.
2. EMPOWER ANNUITY is a foreign life and health insurer domiciled in Colorado and authorized to transact insurance business in Florida.
3. Great-West Life has applied for and, subject to the present and continuing satisfaction of the requirements, terms, and conditions established herein, has satisfactorily met all of the conditions precedent to change its name to EMPOWER ANNUITY, effective September 1, 2022, pursuant to the requirements set forth by Section 627.410, Florida Statutes. The name

change was approved, and the OFFICE issued a new Certificate of Authority, attached as Exhibit A, reflecting the name change.

4. In conjunction with the request to use previously approved Great-West Life forms, EMPOWER ANNUITY has filed with the OFFICE a "Name Change Endorsement," which reflects the corporate name change from Great-West Life to EMPOWER ANNUITY. The endorsement is attached as Exhibit B.

5. EMPOWER ANNUITY states that no material changes were realized within the corporate structure.

6. As a material condition to approval of the above request, EMPOWER ANNUITY, by execution of this Consent Order, certifies to the OFFICE that all policy forms previously utilized by Great-West Life in Florida comply with applicable provisions of the Florida Insurance Code. EMPOWER ANNUITY further certifies that the only change required to achieve compliance prospectively is the substitution of the name EMPOWER ANNUITY in lieu of Great-West Life and the only change in the forms is the name and logo. If the above certification is not correct, EMPOWER ANNUITY acknowledges that such misrepresentations may be considered willful, and penalties assessed accordingly.

7. Attached as Exhibit C1, Exhibit C2, and Exhibit C3 are lists of all policy forms EMPOWER ANNUITY has that are currently in use to administer in-force business. EMPOWER ANNUITY will modify the forms contained in these exhibits with the name and logo change with the exception of those forms that EMPOWER ANNUITY has indicated are no longer sold or marketed.

8. EMPOWER ANNUITY shall mail to each of its insureds a copy of the name change endorsement. EMPOWER ANNUITY may continue to sell the old policy forms, with the

name change endorsement, for a period of 90 days after the date this Consent Order is executed by the OFFICE. During the 90-day time period allowed by this paragraph, EMPOWER ANNUITY shall reprint the policy forms contained in Exhibit C1, Exhibit C2, and Exhibit C3, with the exception of those forms that EMPOWER ANNUITY has indicated are no longer sold or marketed, containing the new corporate name and logo. After 90 days from the date this Consent Order is executed by the OFFICE, EMPOWER ANNUITY shall only sell policy forms containing the new company name and logo and is not authorized to sell previously approved policies containing the old information with a name change endorsement affixed.

9. EMPOWER ANNUITY shall pay costs in the amount of \$3,000 United States Dollars within 30 days of the date this Consent Order is executed by the OFFICE. EMPOWER ANNUITY shall send payment for the administrative costs to the payment address on the attached invoice.

10. EMPOWER ANNUITY shall continue to comply with all statutes and applicable rules of the OFFICE governing form filings and rate filings.

11. EMPOWER ANNUITY agrees that any deadlines, reporting requirements, other provisions, or requirements set forth in this Consent Order may be altered or terminated by written approval of the OFFICE. Such written approval by the OFFICE is subject to statutory or administrative regulation limitations.

12. EMPOWER ANNUITY agrees that, upon execution of this Consent Order, failure to adhere to one or more of the terms and conditions contained herein may result, without further proceedings, in the OFFICE suspending, revoking, or taking other administrative action as it deems appropriate upon EMPOWER ANNUITY's Certificate of Authority in this state in accordance with Sections 120.569(2)(n) and 120.60(6), Florida Statutes.

13. EMPOWER ANNUITY expressly waives a hearing in this matter, the making of findings of fact and conclusions of law by the OFFICE, and all further and other proceedings herein to which it may be entitled by law or rules of the OFFICE. EMPOWER ANNUITY hereby knowingly and voluntarily waives all rights of any kind to challenge or to contest this Consent Order in any forum available to it, now or in the future, including the right to any administrative proceeding, state or federal court action, or any appeal.

14. EMPOWER ANNUITY affirms that all requirements set forth herein are material to the issuance of this Consent Order.

15. Except as set forth in this Consent Order, each party to this section shall bear its own costs and fees.

16. The parties agree that this Consent Order shall be deemed to be executed when the OFFICE has executed a copy of this Consent Order bearing the signature of the authorized representative of EMPOWER ANNUITY, notwithstanding the fact that the copy may have been transmitted to the OFFICE electronically. Further, EMPOWER ANNUITY agrees that the signature of its authorized representative, as affixed to the Consent Order, shall be under the seal of a Notary Public.

(The remainder of this page is intentionally left blank.)

WHEREFORE, the agreement between EMPOWER ANNUITY INSURANCE COMPANY OF AMERICA and the FLORIDA OFFICE OF INSURANCE REGULATION, the terms and conditions of which are set forth above, is APPROVED, and the request to use previously approved Great-West Life forms with the new name and logo without re-filing same for approval pursuant to Section 627.410, Florida Statutes, is APPROVED.

FURTHER, all terms and conditions contained herein are hereby ORDERED.

DONE AND ORDERED this 24th day of May, 2023.




Michael Yaworsky, Commissioner
Office of Insurance Regulation

By execution hereof, EMPOWER ANNUITY INSURANCE COMPANY OF AMERICA consents to entry of this Consent Order, agrees without reservation to all of the above terms and conditions and shall be bound by all provisions herein. The undersigned represents that they have the authority to bind EMPOWER ANNUITY INSURANCE COMPANY OF AMERICA to the terms and conditions of this Consent Order.



EMPOWER ANNUITY INSURANCE COMPANY OF AMERICA

By: Laura Gene Miller

Print Name: Laura Gene Miller

Title: General Counsel

Date: April 10, 2023

STATE OF Colorado

COUNTY OF Adams

The foregoing instrument was acknowledged before me by means of ☒ physical presence

or ☐ online notarization, this 10th day of April 2023, by Laura G. Miller

as General Counsel for Empower Annuity Insurance Company of America
(type of authority; e.g., officer, trustee, attorney in fact) (name of person signing for company) (company name)

Valerie Bell

(Signature of the Notary)



(Print, Type or Stamp Commissioned Name of Notary)

Personally Known X OR Produced Identification _____

Type of Identification Produced _____

My Commission Expires: 12/02/2025

COPIES FURNISHED TO:

Camilia Nguyen
Employee Benefits & Insurance Contracts Specialist
Empower Annuity Insurance Company of America
8525 E. Orchard Road, Suite 2T3
Greenwood Village, Colorado, 80111
camilia.nguyen@gwl.com

JAMES DUNN, Director
Life & Health Product Review
Office of Insurance Regulation
200 East Gaines Street
Tallahassee, FL 32399-0329

WILLIAM OGLO, Assistant General Counsel
Office of Insurance Regulation
200 East Gaines Street
Tallahassee, Florida 32399-0329
Phone: (850) 413-4142
Email: bill.oglo@flor.com

FLORIDA OFFICE OF INSURANCE REGULATION

EMPOWER ANNUITY INSURANCE COMPANY OF AMERICA

Is hereby authorized to transact insurance in the State of Florida.

This certificate signifies that the company has satisfied all requirements of the Florida Insurance Code for the issuance of a LIFE AND HEALTH INSURER CERTIFICATE OF AUTHORITY and remains subject to the laws of Florida.

Original Issuance: 04/22/1976

Replacement Issuance: Thursday, September 1, 2022

No. 22 - 840467907

David Altmaier

David Altmaier
Commissioner
Office of Insurance Regulation

Exhibit A

APPROVED

EMPOWER ANNUITY INSURANCE COMPANY OF AMERICA

A Stock Company

8515 East Orchard Road, Greenwood Village, CO 80111

For inquiries, information or resolution of complaint, call [1-855-756-4738]

Date Received: 11/18/2022
Date of Approval: 11/02/2022
FL OFFICE OF INSURANCE REGULATION

NAME CHANGE ENDORSEMENT ("Endorsement")

This Endorsement is issued by Empower Annuity Insurance Company of America as part of the Policy, Certificate, Contract, and/or Agreement to which it is attached.

Great-West Life & Annuity Insurance Company has changed its name to Empower Annuity Insurance Company of America. As a result of the name change, your Policy, Certificate, Contract and/or Agreement is amended as follows:

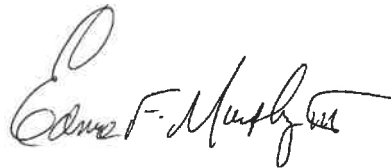
The name of the issuing company for your Policy, Certificate, Contract and/or Agreement is hereby changed from Great-West Life & Annuity Insurance Company to **Empower Annuity Insurance Company of America**.

Accordingly, all references in your Policy, Certificate, Contract and/or Agreement to Great-West or GWL&A are hereby changed to **Empower**.

All other terms and conditions of the Policy, Certificate, Contract and/or Agreement remain unchanged.

The effective date of this Endorsement is the later of (a) September 1, 2022, and (b) the Policy, Certificate, Contract and/or Agreement effective date.

Signed for Empower Annuity Insurance Company of America.



President

Exhibit B

Florida - Group Annuities - List of Contract Forms

(FLA 22-023570)

<i>Form No.</i>	<i>Approved Date</i>	<i>Tracking No.</i>
GDCMF184	3/11/1984	page attached
GATSA 184	3/11/1984	page attached
GTSMF 184	3/11/1984	page attached
GDCA 184	3/11/1984	page attached
GTSA 184	1/8/1986	page attached
GTSA 191	3/28/1991	91-4639
GTSAMT 191	3/28/1991	91-4639
GDC 990 FFSII	8/15/1991	91-1136
QGAC 486	10/3/1991	91-12569
QGAC 492 FFSII	8/12/1992	92-10313
GWLA/CODA 498	4/4/1998	98-4828
GWLA/CODA 599 (FL)	8/5/1999	99-8225
GFAC 1-02	3/17/2003	03-01684
GPF 1-02	3/17/2003	03-01684
GPFII 1-03	3/17/2003	03-01684
GFF-NONERISA 403(b) 1-02	3/17/2003	03-01684
GFF-ERISA 403(b) 1-02	3/17/2003	03-01684
GFF-NONERISA 1-02	3/17/2003	03-01684
DIGF 1-02	3/17/2003	03-01684
SWD 1-02	3/17/2003	03-01684
MGF 1-02	3/17/2003	03-01684
GCF ERISA 401(a)/(k), 457(b) 1-02	3/17/2003	03-01684
GCF ERISA 403(b) 1-02	3/17/2003	03-01684
GCF LOI 403(b) 1-02	3/17/2003	03-01684
GCF NONERISA 1-02	3/17/2003	03-01684
457(f)FE	3/17/2003	03-01684
NG457FE	3/17/2003	03-01684
NQDCFE	3/17/2003	03-01684
403FE	3/17/2003	03-01684
C401(k)FE	3/17/2003	03-01684
GFVAC 1-02	3/17/2003	03-01714
GAC A2-02	3/17/2003	03-01714
STF 1-02	3/17/2003	03-01714
SAF 1-02	3/17/2003	03-01714
GGF 1-02	3/17/2003	03-01714
FFI 1-02	3/17/2003	03-01714
401E	3/17/2003	03-01714
401FVEDB	3/17/2003	03-01714
G457E	3/17/2003	03-01714

Florida - Group Annuities - List of Contract Forms

(FLA 22-023570)

<i>Form No.</i>	<i>Approved Date</i>	<i>Tracking No.</i>
G457FVEDB	3/17/2003	03-01714
415E	3/17/2003	03-01714
403FVE	3/17/2003	03-01714
403FVEDB	3/17/2003	03-01714
457(f)FVE	3/17/2003	03-01714
NG457FVE	3/17/2003	03-01714
NQDCFVE	3/17/2003	03-01714
C401(k)FVE	3/17/2003	03-01714
IGAC 1-02 FL	2/14/2003	03-01764
IGAC A1-02 FL	2/14/2003	03-01764
KGPF 06	8/16/2006	06-10330
GAC Amend 07 FL	2/6/2008	08-00120
C401(k)E 08	6/13/2008	08-10233
GFVAC DB 08	10/21/2009	08-18699
GAC A 08 DB	10/21/2009	08-18699
DB GPF 08	10/21/2009	08-18699
DB DIGF 08	10/21/2009	08-18699
JLO CERT 07-08	10/21/2009	08-18699
JLGP CERT 07-08	10/21/2009	08-18699
SLGP CERT 07-08	10/21/2009	08-18699
SLO CERT 07-08	10/21/2009	08-18699
SP CERT 07-08	10/21/2009	08-18699
GFVAC 08 FFI	2/16/2009	09-02340
GFAC 08 FFI	2/16/2009	09-02340
GAC A 08 FFI FL	2/16/2009	09-02340
KGPF 08 FFI FL	2/16/2009	09-02340
DIGF 08 FFI FL	2/16/2009	09-02340
Specification Page 08 FFI	2/16/2009	09-02340
GFVAC 08 FFI PC	2/16/2009	09-02340
GFAC 08 FFI PC	2/16/2009	09-02340
SpecPg09CityofJacksonville	8/11/2009	09-14693
SpecPg09CityofDunedin	8/25/2009	09-16123
GLWB 09 FL	11/16/2009	09-19764
GAC A GLWB 09 FL	11/16/2009	09-19764
GLWB 09 GBF (rev 7-10)	8/2/2010	10-12889
GLWB 09 CTSP (rev 7-10)	8/2/2010	10-12889
GAC A GLWB 10 FL	8/2/2010	10-12889
GLWB 10 403(b) FL	9/3/2010	10-15183
GAC A GLWB 10 403(b) FL	9/3/2010	10-15183

Florida - Group Annuities - List of Contract Forms

(FLA 22-023570)

<i>Form No.</i>	<i>Approved Date</i>	<i>Tracking No.</i>
GLWB 10 403(b) PC FL	9/3/2010	10-15183
GFAC 10 FFI	4/4/2011	11-03701
GFAC 10 FFI PC	4/4/2011	11-03701
SAF 11 (rev.12-11)	1/4/2012	11-20439
SAF A11 FL	1/4/2012	11-20439
SP SAF 11	1/4/2012	11-20439
GFVAC 1-02 FL VAC Amend (rev 8-12)	9/6/2012	12-14492
GIF 10 FFII FL (rev 1-13)	1/28/2013	13-01128
GPP - State of FL (4-13)	5/7/2013	13-08477
GFVAC 10 FFII	7/5/2013	13-10356
GAC A 10 FFII FL	7/5/2013	13-10356
GIF 10 FFII FL	7/5/2013	13-10356
GGF 10 FFII (rev 11-11)	7/5/2013	13-10356
Specification Page 10	7/5/2013	13-10356
GFAC 10 FFII	7/5/2013	13-10375
GFAC 10 FFI PC GIF FL	2/6/2014	14-02228
SAF 11 FL (rev 03-15)	3/26/2015	15-04956
QLAC 15 fl	4/1/2015	15-05106
QLAC A15 FL	4/1/2015	15-05106
QLAC 15 PC FL	4/1/2015	15-05106
QLAC SP FL	4/1/2015	15-05106
SFII 15 R	10/6/2015	15-20209
SFII A15 R FL	10/6/2015	15-20209
SFII 15 PC R	10/6/2015	15-20209
SFII 15 401E	10/6/2015	15-20209
SFII 15 403E	10/6/2015	15-20209
SFII 15 G457E	10/6/2015	15-20209
SFII 15 SPC	10/6/2015	15-20209
SFII 15 U	10/27/2015	15-20539
SFII A15 U FL	10/27/2015	15-20539
QLAC 15 JS RoP Amend (12-15)	1/6/2016	16-00146
QLAC 15 PC JS RoP Amend (12-15)	1/6/2016	16-00146
QLAC 15 QPSA (12-15)	1/6/2016	16-00146
QLAC 15 PC QPSA (12-15)	1/6/2016	16-00146
SFII 15 U (06-16)	7/7/2016	16-15017
SFII 15 R (06-16)	7/7/2016	16-15020
SFII 15 PC R (06-16)	7/7/2016	16-15020
GFVAC 16 FFII FL	9/15/2016	16-19720

Florida - Group Annuities - List of Contract Forms

(FLA 22-023570)

Form No.	Approved Date	Tracking No.
GAC A16 FFII FL	9/15/2016	16-19720
SGF 16 FFII	9/15/2016	16-19720
KGPF 16 FFII	9/15/2016	16-19720
Spec Pg 16	9/15/2016	16-19720
GFAC 16 FFII FL	9/15/2016	16-19749
GFAC 16 FFI FL	3/30/2017	17-07498
GAC A16 FFI FL	3/30/2017	17-07498
SGF 16 FFI FL	3/30/2017	17-07498
SGF 16 FFI FL (non-403b)	3/30/2017	17-07498
KGPF 16 FFI FL	3/30/2017	17-07498
KGPF 16 FFI FL (non-403b)	3/30/2017	17-07498
GFAC 16 FFI PC	3/30/2017	17-07498
GFAC 16 FFII FL	3/30/2017	17-07498
GFVAC 16 FFII FL	3/30/2017	17-07498
SGF 16 FFII FL	3/30/2017	17-07498
KGPF 16 FFII FL	3/30/2017	17-07498
SGF-Inst 16 FFII FL	9/27/2017	17-19538
U GFAC 18 FFI FL	8/29/2018	18-10354
401(a)(k)E-UGAC18FFI	8/29/2018	18-10354
403(b)E-UGAC18FFI	8/29/2018	18-10354
457(b)GE-UGAC18FFI	8/29/2018	18-10354
457(b)(NG),457(f)E-UGAC18FFI	8/29/2018	18-10354
U GAC A18 FFI FL	8/29/2018	18-10354
U GIF 18 FFI FL	8/29/2018	18-10354
U SGF 18 FFI FL	8/29/2018	18-10354
U SGF-Inst 18 FFI FL	8/29/2018	18-10354
U Spec Pg 18	8/29/2018	18-10354
U GFVAC 19 FFII	4/18/2019	19-112854
401(a)(k)E-UGAC19FFII	4/18/2019	19-112854
457(b)GE-UGAC19FFII	4/18/2019	19-112854
U GAC A19 FFII FL	4/18/2019	19-112854
U GWI FASI 19 FFII FL	4/18/2019	19-112854
U GWI FASII 19 FFII FL	4/18/2019	19-112854
U GWI FASIII 19 FFII FL	4/18/2019	19-112854
U GWI FASIV 19 FFII FL	4/18/2019	19-112854
U GWI FASV 19 FFII FL	4/18/2019	19-112854
U GWI FASVI 19 FFII FL	4/18/2019	19-112854
U Spec Pg 19	4/18/2019	19-112854
JS Cert 19	4/18/2019	19-112854

Florida - Group Annuities - List of Contract Forms

(FLA 22-023570)

<i>Form No.</i>	<i>Approved Date</i>	<i>Tracking No.</i>
JSPC Cert 19	4/18/2019	19-112854
PC Cert 19	4/18/2019	19-112854
SLCR Cert 19	4/18/2019	19-112854
SLIR Cert 19	4/18/2019	19-112854
SLO Cert 19	4/18/2019	19-112854
SLPC Cert 19	4/18/2019	19-112854
U GFAC 19 FFII	4/18/2019	19-112855
U GFAC 19 FFI	7/15/2019	19-125286
403(b)E-UGAC19FFI	7/15/2019	19-125286
457(b)(NG),457(f)E-UGAC19FFI	7/15/2019	19-125286
409AE-UGAC19FFI	7/15/2019	19-125286
U GAC A19 FFI FL	7/15/2019	19-125286
U GWI FASI 19 FFI FL	7/15/2019	19-125286
U GWI FASII 19 FFI FL	7/15/2019	19-125286
U GWI FASIII 19 FFI FL	7/15/2019	19-125286
U GWI FASIV 19 FFI FL	7/15/2019	19-125286
U GWI FASV 19 FFI FL	7/15/2019	19-125286
U GWI FASVI 19 FFI FL	7/15/2019	19-125286
SGF16FFIIFL-05.21	6/4/2021	21-14384
U GFAC 21 FFII FL	7/29/2021	21-019227
401(a)(k)E-UGAC21FFII	7/29/2021	21-019227
457(b)GE-UGAC21FFII	7/29/2021	21-019227
U GAC A21 FFII FL	7/29/2021	21-019227
U GWI FASI 21 FFII FL	7/29/2021	21-019227
U GWI FASII 21 FFII FL	7/29/2021	21-019227
U GWI FASIII 21 FFII FL	7/29/2021	21-019227
U GWI FASIV 21 FFII FL	7/29/2021	21-019227
U GWI FASV 21 FFII FL	7/29/2021	21-019227
U GWI FASVI 21 FFII FL	7/29/2021	21-019227
U Spec Pg 21	7/29/2021	21-019227

GREAT-WEST LIFE & ANNUITY

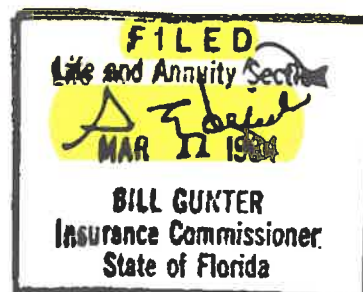
INSURANCE CO.

8.4. 877
✓

March 6, 1984

Mr. Bill Gunter
Insurance Commissioner
State of Florida
Department of Insurance
Tallahassee, FL 32304

Re: FUTUREFUNDS CONTRACT FILING



Dear Mr. Gunter:

Duplicate copies of the Futurefunds Contract series, completed in John Doe fashion, are enclosed. I will itemize the contracts, and related forms, as follows:

CONTRACT NO.

- 1). Group Deferred Compensation Annuity Contract; Form No. **GDCMF 184**
Application Form No. G520
- 2). Group Deferred Tax-Sheltered Annuity Contract; Form No. **GTSMF 184**
Application Form No. G522
Participant Certificate Form No. G545 184
- 3). Group Deferred Tax-Sheltered Annuity for Association;
Form No. **GATSMF 184**
Application Form No. G522A
Participant Certificate Form No. G549 184
Participation Agreement; Form No. TSMFPA 184
- 4). Group Deferred Compensation Annuity Contract; Form No. **GDCM 184**
Application Form No. G519
- 5). Group Deferred Tax-Sheltered Annuity Contract; Form No. **GTSA 184**
Application Form No. G521
Participant Certificate Form No. G544 184
- 6). Group Deferred Tax-Sheltered Annuity Contract for Association;
Form No. **GATSA 184**
Application Form No. G521A
Participant Certificate Form No. G548 184
Participation Agreement; Form No. TSAPA 184

RECEIVED
MAR 9 1984

FORMS AND CONTRACTS

filed
8.2.84

GREAT-WEST LIFE & ANNUITY

INSURANCE CO.

FILED

Life and Annuity Section

HOME OFFICE - WICHITA, KANSAS
ADMINISTRATIVE OFFICES
DENVER, COLORADO

MAR 11 1984

BILL GUNTER
Insurance Commissioner,
State of Florida

John Doe University

GROUP POLICYHOLDER

GROUP POLICY NUMBER

12345GP

GROUP ANNUITY CONTRACT DATE

December X, 19XX

Group Deferred Tax-Sheltered Annuity, Non-Participating, for Association

The provisions on the following pages, together with the Application for this Group Annuity Contract and the Participation Agreement, are part of this Group Annuity Contract.

Signed for the Great-West Life & Annuity Insurance Company on the issuance of the Group Annuity Contract on the Annuity Contract Date.

Secretary

President

For the Actuary

15 Day Free-Look

The Participant may return his/her Participant Certificate within 15 days of its mailing and have all Contributions refunded to him/her if, after examination, the Participant is not satisfied with it for any reason.

Group Deferred Tax-Sheltered Annuity for Association

GATSA 184

GREAT-WEST LIFE & ANNUITY INSURANCE CO.

HOME OFFICE - WICHITA, KANSAS
ADMINISTRATIVE OFFICES
DENVER, COLORADO

GROUP POLICYHOLDER

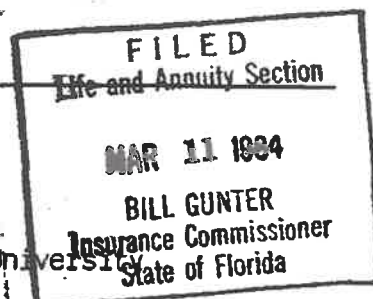
ABC University

GROUP POLICY NUMBER

12345GP

GROUP ANNUITY CONTRACT DATE

December X, 19XX



Group Deferred Compensation Annuity, Non-Participating

The provisions on the following pages, together with the Application for this Group Annuity Contract, are part of this Group Annuity Contract.

For the purposes of this Group Annuity Contract, "Plan" means the plan and adoption agreement that the Group Policyholder has designated as the ABC University Deferred Compensation Plan.

Signed for the Great-West Life & Annuity Insurance Company on the issuance of the Group Annuity Contract on the Annuity Contract Date.

Secretary

President

For the Actuary

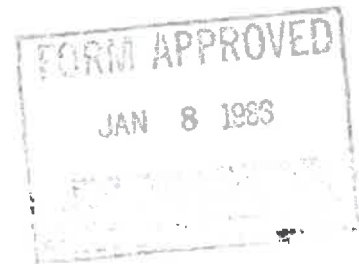
This Group Annuity Contract is a legal contract between the Group Policyholder and the Great-West Life & Annuity Insurance Company. PLEASE READ THIS ANNUITY CONTRACT CAREFULLY. IT IS A CONTRACT WHICH MAY PROVIDE FOR PAYMENTS OR VALUES WHICH ARE NOT GUARANTEED AS TO FIXED-DOLLAR AMOUNT BUT MAY VARY ACCORDING TO THE INVESTMENT EXPERIENCE OF A VARIABLE ANNUITY ACCOUNT.

Group Deferred Compensation Annuity

GDCMF184

GREAT-WEST LIFE & ANNUITY

INSURANCE CO.



HOME OFFICE - WICHITA, KANSAS
ADMINISTRATIVE OFFICES
DENVER, COLORADO

GROUP POLICYHOLDER	John Doe University
GROUP POLICY NUMBER	12345GP
GROUP ANNUITY CONTRACT DATE	December X, 19XX

SPECIMEN

Group Deferred Tax-Sheltered Annuity, Non-Participating

The provisions on the following pages, together with the Application for this Group Annuity Contract, are part of this Group Annuity Contract.

Signed for the Great-West Life & Annuity Insurance Company on the issuance of the Group Annuity Contract on the Annuity Contract Date.

D. C. Lamm

Secretary

B. Kinney

President

R. K. Shaw

For the Actuary

15 Day Free-Look

The Participant may return his/her Participant Certificate within 15 days of its mailing and have all Contributions refunded to him/her if, after examination, the Participant is not satisfied with it for any reason.

Group Deferred Tax-Sheltered Annuity

Great-West
LIFE & ANNUITY INSURANCE COMPANY

March 20, 1991

Florida Dept. of Insurance
Life & Health
Policy Approval Division
Tallahassee, Florida 32304

RE: FutureFunds TSA Contracts Form Nos. **GTSAMF 191 AND GTSA 191**

Dear Sir/Madam:

Duplicate copies of the above noted forms, completed in John Doe fashion are enclosed. These forms are new forms and do not replace any forms currently in use. To my knowledge these forms comply with the laws and regulations of the state of Florida and do not contain any unusual or possible controversial items which deviate from normal company or industry standards.

This contract will be marketed by our group sales force. This sales force includes regular Great-West Life employees, agents and independent brokers and properly licensed registered representatives.

The above noted contracts are designed to meet the requirements of Section 403(b) of the Internal Revenue Code and will be offered to public schools systems, hospitals, associations and non profit organizations under Section 501(c)(3) of the Code. Benefit payments, periodic contributions, various method of payment options, as well as guaranteed principle and interest and variable sub-accounts are features of this form. Each variable sub-account has its own accumulation unit and annuity value.

The first page of the variable contract (No. GTSAMF 191) will contain a STATEMENT to the effect that it is a contract which may INCREASE OR DECREASE according to the investment experience of the Variable Annuity Account. The above form utilizes the "FutureFunds" Series Account which is registered as a unit investment trust under the Investment Company Act of 1940 as amended. DIGFR-1089, GCFR-1089, MGFR 1-91, SWOR 1-91 and VLR 1-91 are riders to the contract, providing funding options and loans for guaranteed sub-accounts and will normally be attached at issue. Form Number GTSA 191 is a contract which contains guaranteed funds only, and no variable funds are included under this contract.

All of the material in brackets (blocked) is intended to be variable material and thus is subject to inclusion or omission according to the needs of a particular group contractholder.

This form is exempt from filing in Colorado our state of domicile. We will be filing this form in all states which we are admitted.

A postage paid envelope addressed to our administrative offices in Englewood is also included. We respectfully request approval of this form for use in Florida. If you have any questions or problems please do not hesitate to telephone me at our toll free number 1-800-537-2033.

Sincerely,

Myra L. Green
Myra L. Green,
Legislative Analyst
Group Pension Products



Executive Offices
8505 E. Orchard Rd.
Englewood, Colorado 80111
(303) 889-3000

FILED
FORMS ONLY EFFECTIVE
STATE OF FLORIDA

MAR 28 1991

TOM GALLAGHER
INSURANCE COMMISSIONER
BY *[Signature]*

RECEIVED
MAR 26 1991
FORMS AND CONTRACTS

FL Forms List – Individual Annuities (FLA 22-023564)

The following forms are no longer sold or marketed:

Yellow – This list contains forms which were filed through Florida iPortal.

Green – This list contains forms which were filed through the MSLH Filing Portal.

Form No.	Form Name/Product Type	Approval Date	Tracking No.
J444	Individual Deferred Annuity	11/24/2009	FLA 09-22148
J555r2-fl	Individual Annuity	12/11/2007	FLA 07-21620
J555MMF-FL J555-GLWB-fl J555-END J666app	Individual Variable Deferred Annuity	11/30/2011	FLA 11-16098
J777	Individual Variable Deferred Annuity	8/13/2013	FLA 08-21556
J100	Individual Variable Deferred Annuity	11/18/2016	FLA 16-25887
ILMGA-Core-fl, ILMGA- RIA-Core-fl	Modified Guaranteed Annuity	9/25/2017	FLA 17-18233
J465	Individual Variable Annuity	05/22/2014	MSLH 14-09832
J466	Individual Variable Deferred Annuity	05/22/2014	MSLH 14-09832
J888	Individual Variable Deferred Annuity	04/20/2015	W15-1436279 / FLA 15- 13506

The following forms are in-force and will continue to use for new issuance:

Form No.	Form Name/Product Type	Approval Date	Tracking No.
SFII-fl	Individual Deferred Annuity	08/29/2017	17-18303
SFIapp-fl	Application to Individual Deferred Annuity	08/29/2017	17-18303
SFII-fl-fc	Notice	08/29/2017	17-18303



OFFICE OF INSURANCE REGULATION

KEVIN M. MCCARTY
COMMISSIONER

FINANCIAL SERVICES
COMMISSION

RICK SCOTT
GOVERNOR

JEFF ATWATER
CHIEF FINANCIAL OFFICER

FAM BONDI
ATTORNEY GENERAL

ADAM PUTNAM
COMMISSIONER OF
AGRICULTURE

via email: tanya.gonzales@gwl.com

November 30, 2011

Ms. Tanya D. . Gonzales
Manager, Individual Markets
Great-west Life & Annuity Insurance Company
8515 E. Orchard Rd.
8t2
Greenwood Village, CO 80110

RE: GREAT-WEST LIFE & ANNUITY INSURANCE COMPANY
FORM NUMBER(S): J555MMF-FL, ET AL
FILE LOG NUMBER: FLA 11-16908
PLEASE REFER TO THIS FILE NUMBER WHEN CORRESPONDING

Dear Ms. . Gonzales:

The Office of Insurance Regulation (Office) has completed its review of the above-referenced filing dated 10/25/2011, and received by the Office on 10/25/2011. The Forms submitted in this filing are **APPROVED**.

With this approval the Office presumes that the company and its agents will only issue an annuity contract upon a determination that the contract is appropriate for the individual in regard to his/her insurable needs or financial objectives as required by applicable statute or rule.

The revisions made to Section 626.99(4), F.S., which took effect January 1, 2011, require an annuity contract cover page to contain "any other information required by the department by rule" At this time, it is unknown what other information may be required. Please note that any revisions to the approved form necessitated by the adoption of a rule may require a re-filing for approval pursuant to Section 627.410, F.S.

You may wish to keep informed as to Rule making developments for revisions to Rule 69B-162.011, F.A.C., in this regard.

Feel free to contact me if you have any questions.

Sincerely,

Jim Walker

James W. Walker, CLU, CPM
Senior Management Analyst I
James.Walker@flor.com
(850) 661-9017

...

JAMES W. WALKER • SENIOR MANAGEMENT ANALYST I • LIFE & HEALTH PRODUCT REVIEW
200 EAST GAINES STREET • TALLAHASSEE, FLORIDA 32399-0328 • (850) 413-3152 • FAX (850) 922-3866
website: www.flor.com • James.Walker@flor.com

Affirmative Action / Equal Opportunity Employer

FL Forms List – Individual Life (FLA 22-023563)

Yellow – This list contains forms which were filed through Florida iPortal and no longer sold or marketed.

Green – This list contains forms which were filed through Florida iPortal and are currently in use to administer in-force business.

Form No.	Form Name/Product Type	Approval Date	Tracking No.
J345	Term Life Insurance Renewable to Age 80	Not available	Not available
J374	Term Life Insurance Renewable to Age 80	Not available	Not available
J374X-fl	Term Life Insurance Renewable to Age 80	11/19/2008	FLA 08-21556
J374u-20	Term Life Insurance Renewable to Age 80	8/16/2005	FLA 05-08386
J3375	Term Life Insurance Renewable to Age 80	Not available	Not available
J3375X-fl	Term Life Insurance Renewable to Age 80	11/19/2008	FLA 08-21556
J3375-20	Term Life Insurance Renewable to Age 80	9/15/2005	FLA 05-09092
J263d	Single Premium Universal Life	10/27/2010	FLA 10-16415
J263d (filed with page/form number J263rev2)	Single Premium Universal Life	3/23/2011	FLA 11-04839
J263d (filed with page/form number J263-3)	Single Premium Universal Life	5/5/2012	FLA 12-08632
J263d (filed with page/form number J263rev1 and replaced with J263rev2)	Single Premium Universal Life	11/18/2013	FLA 13-20115
J263X-fl	Single Premium Universal Life	6/9/2014	FLA 14-10556
J262	Single Premium Whole Life	6/30/2005	FLA 05-06709
J262X	Single Premium Whole Life	9/28/2005	FLA 05-11165
J262Y-d	Single Premium Whole Life	11/17/2008	FLA 08-21502
J309	Simplified Issue Term Life Insurance	Not available	Not available
J340	Simplified Issue Term Life Insurance	Not available	Not available
J278f	Whole Life	7/26/2005	FLA 05-07301
J265	Whole Life (1999)	Not available	Not available

yellow

J277	Whole Life (2001)	5/31/2001	Not available
J348	Term Life Insurance	Not available	Not available
J319d	Annual Renewable Term Life	6/29/2005 (rate refile)	FLA 05-06754
J278X-fl	Whole Life (2013)	11/12/2013	FLA 13-18833
J278X-2019-fl	Whole Life (2020)	1/6/2020	FLA 19-141209
X105	Whole Life Paid Up at Age 95	Not available	Not available
X371	Whole Life Paid Up at Age 95	Not available	Not available
X103	Whole Life Paid Up at Age 90	Not available	Not available
X220	Universal Life	Not available	Not available
X223	Universal Life	Not available	Not available
J227	Universal Life	Not available	Not available
J201	Non-Participating Whole Life Paid Up at Age 95	Not available	Not available

Policies, forms, and notices used to administer in-force business. Where applicable Company name and logo will be amended to reflect Company name changes.

green

<i>Policy Number</i>	<i>Type of Policy</i>	<i>Date of Approval</i>	<i>Tracking Number</i>
GWLA-NPWL-1-FL	Whole Life	01/25/2021	FLA 21-000334
GWLA-CLAC-S410-FL	Trust Certification	1/26/2021	FLA 21-001403
GWLA-CLAC-600-FL	Tobacco Use Questionnaire	1/26/2021	FLA 21-001403
GWLA-CLAC-226-FL	Supplemental Underwriting Application	1/26/2021	FLA 21-001403
GWLA-CLAC-701-FL	Supplement to Life Insurance Application - Part 1	1/26/2021	FLA 21-001403
GWLA-CLAC-702-FL	Statement of Owner Intent	1/26/2021	FLA 21-001403
GWLA-CLAC-526-FL	Policy Change - With Evidence	1/26/2021	FLA 21-001403
GWLA-CLAC-103-FL	Part II Statements Made to Examiner	1/26/2021	FLA 21-001403
GWLA-CLAC-402-FL	Part 1A Supplemental Application Medical Declarations	1/26/2021	FLA 21-001403
GWLA-CLAC-U601-FL	Parachute/Sky Diving Questionnaire	1/26/2021	FLA 21-001403
GWLA-CLAC-U657-FL	Mountain/Rock Climbing Questionnaire	1/26/2021	FLA 21-001403
GWLA-CLAC-602-FL	Military Questionnaire	1/26/2021	FLA 21-001403
GWLA-CLAC-525-FL	Individual Life Insurance Application for Reinstatement	1/26/2021	FLA 21-001403
GWLA-CLAC-J242D-FL	Individual Life Application for Reinstatement (Term and WL)	1/26/2021	FLA 21-001403
GWLA-CLAC-J263-FL	Individual Life Application for Reinstatement (SPUL and SPWL)	1/26/2021	FLA 21-001403
GWLA-CLAC-J286-FL	Individual Life Application (Re-Entry)	1/26/2021	FLA 21-001403
GWLA-CLAC-J286-FL	Individual Life Application (Re-Entry)	1/26/2021	FLA 21-001403
GWLA-CLAC-K398-FL	Individual Life Application (Policy)	1/26/2021	FLA 21-001403

green

Policy Number	Type of Policy	Date of Approval	Tracking Number
	Change Part 2)		
GWLA-CLAC-K398-FL	Individual Life Application (Policy Change Part 2)	1/26/2021	FLA 21-001403
GWLA-CLAC-K397-FL	Individual Life Application (Policy Change Part 1)	1/26/2021	FLA 21-001403
GWLA-CLAC-100-FL	Important Notice Regarding "Save-Age" Dating of Policy	1/26/2021	FLA 21-001403
U665-GW-FL	Home Office Endorsement	1/26/2021	FLA 21-001403
GWLA-CLAC-U646-FL	Foreign Travel and Residence Supplement	1/26/2021	FLA 21-001403
GWLA-CLAC-601-FL	Foreign National Questionnaire	1/26/2021	FLA 21-001403
GWLA-CLAC-603-FL	Drug and Alcohol Use Questionnaire	1/26/2021	FLA 21-001403
GWLA-CLAC-406A-FL	Continuation of Insurance	1/26/2021	FLA 21-001403
GWLA-CLAC-405R-FL	Confidential Financial Statement	1/26/2021	FLA 21-001403
GWLA-CLAC-U663-FL	Aviation, Scuba Diving, Racing Questionnaires	1/26/2021	FLA 21-001403
GWLA-CLAC-HIPAA2-FL	Authorization to Obtain and Disclose Information	1/26/2021	FLA 21-001403
GWLA-CLAC-502-FL	Application for Conversion or Exchange	1/26/2021	FLA 21-001403
GWLA-CLAC-502-FL	Application for Conversion or Exchange	1/26/2021	FLA 21-001403
A447-GW-FL	Amendment to Application with Health Statement	1/26/2021	FLA 21-001403
A447-GW-FL	Amendment to Application with Health Statement	1/26/2021	FLA 21-001403
A446-GW-FL	Amendment to Application	1/26/2021	FLA 21-001403
A448-GW-FL	Amendment to Application	1/26/2021	FLA 21-001403
A448-GW-FL	Amendment to Application	1/26/2021	FLA 21-001403

RECEIVED



2023 APR 24 AM 10:38

CLERK'S OFFICE

MICHAEL YAWORSKY
INSURANCE COMMISSIONER

INVOICE

EMPOWER ANNUITY INSURANCE COMPANY OF AMERICA
8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

INVOICE DATE: December 15, 2022

INVOICE #: OIR 22-049520

Employee filing request: Olivia Jacob, Administrative Assistant I for OIR, (850) 413-4245
Invoice requested by William Oglo for matter 303853-22

Description	Units	Rate	Price
1003J: ADMIN - L&H FORMS AND RATES - Administrative Fine	1.00	\$3,000.00	\$3,000.00

TOTAL: **\$3,000.00**

PAYMENT DUE UPON RECEIPT: **\$3,000.00**

To ensure that your payment is received and properly credited, please make your check payable to the Florida Department of Financial Services and return this invoice with your payment to:

FLORIDA DEPARTMENT OF FINANCIAL SERVICES
REVENUE PROCESSING SECTION
P.O. BOX 6100
TALLAHASSEE, FL 32314-6100