

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 818908 (6)
 1. Corporation Name
GREAT AMERICAN RESERVE INSURANCE COMPANY



Principal Place of Business 11815 N PENNSYLVANIA ST P O BOX 1911 CARMEL IN 46032	Mailing Address 11815 N PENNSYLVANIA ST P O BOX 1911 CARMEL IN 46032
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/23/1965

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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4. FEI Number 75-0300900	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**INSURANCE COMMISSIONER AND TREASURER
 CAPITOL BLDG
 TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature: typed or printed name of registered agent and for, if applicable (NOTE - Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	COBD	<input type="checkbox"/> DELETE
NAME	HILBERT, STEPHEN C	
STREET ADDRESS	11815 N PENNSYLVANIA ST	
CITY-ST-ZIP	CARMEL IN	
TITLE	P	<input type="checkbox"/> DELETE
NAME	GONGAWARE, DONALD F	
STREET ADDRESS	11815 N PENNSYLVANIA ST	
CITY-ST-ZIP	CARMEL IN	
TITLE	EVPS	<input type="checkbox"/> DELETE
NAME	INLOW, LAWRENCE W	
STREET ADDRESS	11815 N PENNSYLVANIA ST	
CITY-ST-ZIP	CARMEL IN	
TITLE	D	<input type="checkbox"/> DELETE
NAME	INLOW, LAWRENCE W	
STREET ADDRESS	11815 N PENNSYLVANIA ST	
CITY-ST-ZIP	CARMEL IN	
TITLE	SVPT	<input type="checkbox"/> DELETE
NAME	ADAMS, JAMES S	
STREET ADDRESS	11815 N PENNSYLVANIA ST	
CITY-ST-ZIP	CARMEL IN	
TITLE	SVPA	<input type="checkbox"/> DELETE
NAME	RUHL, RONALD F	
STREET ADDRESS	11815 N PENNSYLVANIA ST	
CITY-ST-ZIP	CARMEL IN	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Kilian, Thomas J.	
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	EVPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Dick, Rollin M.	
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	EVPSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Sabl, John J.	
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	SVPAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Colliflower, Michael A.	
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: **4/30/98** (317) 817-6000

CR2034 (10/97)

OFFICERS AND DIRECTORS

<u>Name</u>	<u>Office</u>
Stephen C. Hilbert	Chairman of the Board, Director
Thomas J. Kilian	President, Director
Rollin M. Dick	Executive Vice President and Chief Financial Officer, Director
John J. Sabl	Executive Vice President, General Counsel and Secretary, Director
James S. Adams	Senior Vice President and Treasurer
David J. Barra	Senior Vice President, Finance
Robert E. Burkett, Jr.	Senior Vice President, Legal and Assistant Secretary
Michael A. Colliflower	Senior Vice President, Legal, Chief Compliance Officer and Assistant Secretary
Jon F. Davis	Senior Vice President, Actuarial
William T. Devanney, Jr.	Senior Vice President, Corporate Taxes
James S. Hawke	Senior Vice President, Actuarial
Ronald F. Ruhl	Senior Vice President, Chief Actuary
Mark Shaw	Senior Vice President, Actuarial
K. Lowell Short, Jr.	Senior Vice President, Controller
James M. Crafton	Vice President, Financial Reporting
James C. Crampton	Vice President, Corporate Taxes
Marcus A. Dallas	Vice President, Investment Accounting
Louis S. Kanowsky	Vice President, Statutory Reporting
Daniel M. Kiefer	Vice President, Accounting
Christopher J. Krisch	Vice President, Marketing
Joseph L. Maverick	Vice President, Investment Officer
David A. White	Vice President, Marketing
Steven E. Willeke	Vice President, Financial Reporting
Beth A. Eischeid	Second Vice President, Legal
David D. Humm	Second Vice President, Corporate Taxes
Jill A. Kirk	Second Vice President, Actuarial
Ty V. Nguyen	Second Vice President, Accounting
Ngairé E. Cuneo	Director

The address for Robert E. Burkett, Jr. is 11825 N. Pennsylvania St.,
Carmel, IN 46032.