2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 807484

Entity Name: GREAT AMERICAN INSURANCE COMPANY OF NEW YORK

FILED Feb 27, 2014 Secretary of State CC5430708713

Current Principal Place of Business:

301 E. FOURTH STREET CINCINNATI. OH 45202-4201

Current Mailing Address:

301 E. FOURTH STREET

CINCINNATI. OH 45202-4201 US

FEI Number: 13-5539046 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BERAHA, STEPHEN C

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:

Name

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR, CHAIRMAN, PRESIDENT	Title	DIRECTOR, SVP, CFO, TREASURER
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Name

LARSON, DONALD D WITZGALL, DAVID J Name Name 301 E. FOURTH STREET Address 301 E. FOURTH STREET Address CINCINNATI OH 45202 CINCINNATI OH 45202 City-State-Zip: City-State-Zip:

Title DIRECTOR, SVP, GENERAL Title AVP, ASST. SECRETARY

COUNSEL, SECRETARY ROSEN, EVE CUTLER

Address 301 E. FOURTH STREET 301 E. FOURTH STREET Address

CINCINNATI OH 45202 City-State-Zip: City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR, EVP Title DIRECTOR, EVP

Name GRUBER, GARY J Name BRICHLER, RONALD J. Address 301 E. FOURTH STREET Address 301 E. FOURTH STREET

City-State-Zip: CINCINNATI OH 45202 City-State-Zip: CINCINNATI OH 45202-4201

Title DIRECTOR, SVP Title DIRECTOR

LATTO, AARON B. Name Name PIERCE, MICHAEL D.

301 E. FOURTH STREET Address Address 301 E. FOURTH STREET CINCINNATI OH 45202-4201 City-State-Zip:

CINCINNATI OH 45202-4201 City-State-Zip:

Continues on page 2

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: EVE CUTLER ROSEN

02/27/2014 SENIOR VICE PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name SINGH, PIYUSH K.

Address 49 E. FOURTH STREET

City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR

Name FRANKLIN, LINDLEY M.

Address 125 PARK AVENUE

City-State-Zip: NEW YORK NY 10017

Title DIRECTOR

Name MCEVOY, CAROL G.

Address 125 PARK AVENUE

City-State-Zip: NEW YORK NY 10017

Title DIRECTOR

Name SKELLY, FRANCIS A. JR.

Address 65 BROADWAY

City-State-Zip: NEW YORK NY 10006

Title DIRECTOR

Name SULLIVAN, MICHAEL E. JR.

Address 301 E. FOURTH STREET

City-State-Zip: CINCINNATI OH 45202-4201

Title DIRECTOR

Name LALLY, PHILIP J.

Address 125 PARK AVENUE

City-State-Zip: NEW YORK NY 10017

Title DIRECTOR

Name ROWNEY, JOHN A.

Address 65 BROADWAY

City-State-Zip: NEW YORK NY 10006