2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837290

Entity Name: GREAT AMERICAN ALLIANCE INSURANCE COMPANY

Current Principal Place of Business:

301 E. 4TH ST 15TH FLOOR CINCINNATI, OH 45202

Current Mailing Address:

301 E. 4TH ST 15TH FLOOR CINCINNATI, OH 45202 US

FEI Number: 95-1542353

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 US Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	AVP/AS	Title	PRESIDENT, D, CHAIRMAN, DIRECTOR
Name	BERAHA, STEPHEN C	Name	THOMPSON, JR., DAVID L.
Address	301 E. FOURTH STREET	Address	301 E. FOURTH STREET
City-State-Zip:	CINCINNATI OH 45202	City-State-Zip:	
Title	D/EVP	T :4 -	
Name	MERCURIO, ANTHONY J.	Title	SVP
Address	3250 INTERSTATE DRIVE	Name	LATTO, AARON B.
		Address	301 E. FOURTH STREET
City-State-Zip:	RICHFIELD OH 44286	City-State-Zip:	CINCINNATI OH 45202-4201
Title	D/EVP	Title	VP
Name	SULLIVAN, MICHAEL E. JR.	Name	THOLEN. JOHN W.
Address	301 E. FOURTH STREET	Address	301 E. FOURTH STREET
City-State-Zip:	CINCINNATI OH 45202-4201		
		City-State-Zip:	CINCINNATI OH 45202
Title	SVP/GC	Title	VP, TREASURER, CFO
Name	ERHART, SUE A.	Name	GARDNER, ANNETTE D.
Address	301 E. FOURTH STREET	Address	301 E. FOURTH STREET
City-State-Zip:	CINCINNATI OH 45202		
		City-State-Zip:	CINCINNATI OH 45202

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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: MATTHEW D. FELVUS

SECRETARY, BY TOBIAS 04/26/2023 SHOEMAKER, ATTORNEY-IN-FACT

Date

Officer/Director Detail Continued :

Title	AT	Title	VP/ACTUARY
Name	ZBACNIK, ROBERT J.	Name	HAYS, LISA A.
Address	301 E. FOURTH STREET	Address	301 E. 4TH ST.
City-State-Zip:	CINCINNATI OH 45202-4201	City-State-Zip:	CINCINNATI OH 45202
Title	D	Title	SECRETARY
Name	GILLIS, MICHELLE A.	Name	FELVUS, MATTHEW D.
Address	301 E. 4TH ST.	Address	301 E. 4TH ST 15TH FLOOR
City-State-Zip:	CINCINNATI OH 45202	City-State-Zip:	CINCINNATI OH 45202
Title	SVP	Title	SVP
Name	SIPE, CAROL P.		-
Nume		Name	MUETHING, JAMES L.
Address	301 E. 4TH ST 15TH FLOOR	Name Address	301 E. 4TH ST
	301 E. 4TH ST 15TH FLOOR		301 E. 4TH ST 15TH FLOOR
Address	301 E. 4TH ST 15TH FLOOR	Address	301 E. 4TH ST 15TH FLOOR
Address City-State-Zip:	301 E. 4TH ST 15TH FLOOR CINCINNATI OH 45202	Address City-State-Zip:	301 E. 4TH ST 15TH FLOOR CINCINNATI OH 45202
Address City-State-Zip: Title	301 E. 4TH ST 15TH FLOOR CINCINNATI OH 45202 SVP	Address City-State-Zip: Title	301 E. 4TH ST 15TH FLOOR CINCINNATI OH 45202 DIRECTOR
Address City-State-Zip: Title Name	301 E. 4TH ST 15TH FLOOR CINCINNATI OH 45202 SVP SMITH, JR., BRUCE R. 1450 AMERICAN LANE	Address City-State-Zip: Title Name	301 E. 4TH ST 15TH FLOOR CINCINNATI OH 45202 DIRECTOR HERTZMAN, BRIAN S.