

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 841347

**Entity Name:** GEICO GENERAL INSURANCE COMPANY

**Current Principal Place of Business:**

5260 WESTERN AVENUE  
CHEVY CHASE, MD 20815

**Current Mailing Address:**

ONE GEICO PLAZA  
WASHINGTON, DC 20076 US

**FEI Number: 75-1588101**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            CEO  
Name            COMBS, TODD A  
Address        5260 WESTERN AVENUE  
City-State-Zip: CHEVY CHASE MD 20815

Title            SECRETARY  
Name            NOWACK, CHRISTOPHER J  
Address        5260 WESTERN AVENUE  
City-State-Zip: CHEVY CHASE MD 20815

Title            VP  
Name            PIERCE, NANCY L  
Address        5260 WESTERN AVENUE  
City-State-Zip: CHEVY CHASE MD 20815

Title            TREASURER  
Name            CETLUR, SUHASINI S  
Address        5260 WESTERN AVENUE  
City-State-Zip: CHEVY CHASE MD 20815

*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: CHRISTOPHER J NOWACK**

**CORPORATE  
SECRETARY**

**02/20/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date