

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000003879

**Entity Name:** ARGONAUT GREAT CENTRAL INSURANCE COMPANY**Current Principal Place of Business:**225 W WASHINGTON ST 24TH FL  
CHICAGO, IL 60606**Current Mailing Address:**P O BOX 469011  
SAN ANTONIO, TX 78246-9011 US**FEI Number: 37-0301640****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER  
200 EAST GAINES STREET  
TALLAHASSEE, FL 32399-4201 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 DIRECTOR  
Name WYNN, ALAN L  
Address 225 W WASHINGTON ST 24TH FL  
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR, PRESIDENT  
Name GROSE, GARY E  
Address 225 W WASHINGTON ST 24TH FL  
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR, OFFICER  
Name SWANSTROM, RONALD J  
Address 225 W WASHINGTON ST 24TH FL  
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR, OFFICER  
Name MIKE-MAYER, FRANK  
Address 225 W WASHINGTON ST, 24TH FL  
City-State-Zip: CHICAGO IL 60606

Title SECRETARY  
Name KING, AUSTIN W  
Address 711 BROADWAY ST, STE 400  
City-State-Zip: SAN ANTONIO TX 78215

Title TREASURER  
Name GEURIN, LYNN K  
Address 711 BROADWAY ST, STE 400  
City-State-Zip: SAN ANTONIO TX 78215

Title DIRECTOR, CFO  
Name STRUBLE, KYLE A  
Address 501 7TH AVENUE  
7TH FL  
City-State-Zip: NEW YORK NY 10018

*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: AUSTIN W KING****SECRETARY****03/30/2023**

Electronic Signature of Signing Officer/Director Detail

Date