

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26031

Entity Name: GREAT AMERICAN SECURITY INSURANCE COMPANY**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: 31-1209419****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 DIRECTOR, CHAIRMAN, PRESIDENT
Name LARSON, DONALD D
Address 301 E. FOURTH STREET
City-State-Zip: CINCINNATI OH 45202

Title AVP, ASST. SECRETARY
Name BERAHA, STEPHEN C
Address 301 E. FOURTH STREET
City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR, EVP
Name BRICHLER, RONALD J.
Address 301 E. FOURTH STREET
City-State-Zip: CINCINNATI OH 45202-4201

Title DIRECTOR, SVP
Name LATTO, AARON B.
Address 301 E. FOURTH STREET
City-State-Zip: CINCINNATI OH 45202-4201

Title DIRECTOR, SVP, GENERAL
COUNSEL, SECRETARY
Name ROSEN, EVE CUTLER
Address 301 E. FOURTH STREET
City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR, SVP, CFO, TREASURER
Name WITZGALL, DAVID J
Address 301 E. FOURTH STREET
City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR, EVP
Name GRUBER, GARY J.
Address 301 E. FOURTH STREET
City-State-Zip: CINCINNATI OH 45202-4201

Title DIRECTOR
Name PIERCE, MICHAEL D.
Address 301 E. FOURTH STREET
City-State-Zip: CINCINNATI OH 45202-4201

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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: CHERYL STACY ON BEHALF OF EVE CUTLER
ROSEN****AUTHORIZED
REPRESENTATIVE****04/22/2015**

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 SULLIVAN, MICHAEL E. JR.
Address 301 E. FOURTH STREET
City-State-Zip: CINCINNATI OH 45202-4201