2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 25, 2004 8:00 am
Secretary of State

05-25-2004 90001 023 ***550.00

DOCUMENT # P06815

1. Entity Name
GERLING GLOBAL REINSURANCE CORPORATION OF AMERICA

Principal Place of Business
717 FIFTH AVENUE
NEW YORK, NY 10022 US

Mailing Address
717 FIFTH AVENUE
NEW YORK, NY 10022 US

03132003 Chg-P CR2E034 (10/03)

2. Principal Place of Business
717 FIFTH AVENUE
Suite, Apt. #, etc.
City & State
NEW YORK, NY 10022
Zip 10022 Country

3. Mailing Address
717 FIFTH AVENUE
Suite, Apt. #, etc.
City & State
NEW YORK, NY 10022
Zip 10022 Country

4. FEI Number
13-5009848
Applied For
Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000

7. Name and Address of New Registered Agent

Name
CHIEF FINANCIAL OFFICER
Street Address (P.O. Box Number is Not Acceptable)
~~P.O. BOX 6200(32314-6200)~~
200 EAST GAINES STREET
City TALLAHASSEE FL Zip Code 32399-0000

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	C	☒ Delete	C	☒ Change ☐ Addition
NAME	KNIPPER, STEPHAN		KANN, ACHIM	
STREET ADDRESS	GEREONSHOT D-50670		GEREONSHOF D-50660	
CITY-ST-ZIP	COLOGNE GERMANY,		COLOGNE GERMANY, DE 50660	
TITLE	P	☒ Delete	P	☒ Change ☐ Addition
NAME	MCCAFFERTY, KEVIN		BUNAES, BARD E.	
STREET ADDRESS	717 FIFTH AVENUE		717 FIFTH AVENUE	
CITY-ST-ZIP	NEW YORK, NY 10022		NEW YORK, 10022	
TITLE	CFO	☒ Delete	SD	☒ Change ☐ Addition
NAME	TANNERT, MICHAEL		McGEOUGH, THOMAS J.	
STREET ADDRESS	717 FIFTH AVENUE		717 FIFTH AVENUE	
CITY-ST-ZIP	NEW YORK, NY 10022		NEW YORK, 10022	
TITLE	EVPD	☒ Delete	CFO	☒ Change ☐ Addition
NAME	SMITH, DAVID W		FINKELSTEIN, BRIAN W.	
STREET ADDRESS	717 FIFTH AVENUE		717 FIFTH AVENUE	
CITY-ST-ZIP	NEW YORK, NY 10022		NEW YORK, NY 10022	
TITLE	T	☒ Delete	SVP	☒ Change ☐ Addition
NAME	FINKELSTEIN, BRIAN		KEOGH, BARRY R.	
STREET ADDRESS	717 FIFTH AVENUE		717 FIFTH AVENUE	
CITY-ST-ZIP	NEW YORK, NY 10022		NEW YORK, NY 10022	
TITLE		☐ Delete	SVP	☐ Change ☒ Addition
NAME			POTTS, VINCENT S.	
STREET ADDRESS			717 FIFTH AVENUE	
CITY-ST-ZIP			NEW YORK, NY 10022	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: FINKELSTEIN, BRIAN W. MAY 19. 2004 (212)754-7525
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #