

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000000328

Entity Name: AMERICAN NATIONAL ADMINISTRATORS, INC.

Current Principal Place of Business:

ONE MOODY PLAZA
GALVESTON, TX 77550

Current Mailing Address:

ONE MOODY PLAZA
GALVESTON, TX 77550 US

FEI Number: 76-0356539

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 CHAIRMAN OF THE BOARD
Name WALSH, TIMOTHY A.
Address ONE MOODY PLAZA
City-State-Zip: GALVESTON TX 77550

Title PRESIDENT
Name OSTIGUY, MATTHEW R.
Address ONE MOODY PLAZA
City-State-Zip: GALVESTON TX 77550

Title VP, FINANCE
Name NASERY, FOROZAN
Address ONE MOODY PLAZA
City-State-Zip: GALVESTON TX 77550

Title TREASURER
Name SNEDDEN, D. DENISE
Address ONE MOODY PLAZA
City-State-Zip: GALVESTON TX 77550

Title ASSISTANT TREASURER
Name GAMERO, ELVA
Address ONE MOODY PLAZA
City-State-Zip: GALVESTON TX 77550

Title CORPORATE SECRETARY
Name MONTICELLO, SEAN A.
Address ONE MOODY PLAZA
City-State-Zip: GALVESTON TX 77550

Title ASSISTANT CORPORATE SECRETARY
Name HOFFMAN, I. JELAYNE
Address ONE MOODY PLAZA
City-State-Zip: GALVESTON TX 77550

Title DIRECTOR
Name MERRILL, BRODY J.
Address ONE MOODY PLAZA
City-State-Zip: GALVESTON TX 77550

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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: SEAN A. MONTICELLO

CORPORATE SECRETARY

04/10/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name OSTIGUY, MATTHEW R.
Address ONE MOODY PLAZA
City-State-Zip: GALVESTON TX 77550

Title DIRECTOR
Name WALSH, TIMOTHY A.
Address ONE MOODY PLAZA
City-State-Zip: GALVESTON TX 77550