2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2025
Secretary of State
4395422939CC

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Entity Name: ARGONAUT-MIDWEST INSURANCE COMPANY

Current Principal Place of Business:

24 E WASHINGTON ST STE 950
CHICAGO, IL 60602

Current Mailing Address:

P O BOX 469011
SAN ANTONIO, TX 78246-9011 US

FEI Number: 36-2489372

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E 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	RAMGE, BRUCE
Address	1350 ALDRICH RD
City-State-Zip:	LINCOLN NE 68510

Title	CO-CHIEF INVESTMENT OFFICER
Name	YABLON, MICHAEL
Address	250 VESEY ST 15TH FL
City-State-Zip:	NEW YORK NY 10281

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

Title	CFO, TREASURER
Name	WESTBROOK, JULIAN III
Address	711 BROADWAY ST STE 400
City-State-Zip:	SAN ANTONIO TX 78215

Title	PRESIDENT
Name	CORRY, DAVID
Address	24 E WASHINGTON ST STE 950
City-State-Zip:	CHICAGO IL 60602

Title	CO-CHIEF INVESTMENT OFFICER
Name	LORILLA, LORENZO
Address	250 VESEY ST 15TH FL
City-State-Zip:	NEW YORK NY 10281

Title	ASST. SECRETARY
Name	BERG, ANDREW K
Address	501 7TH AVE 7TH FL
City-State-Zip:	NEW YORK NY 10018

Title	DIRECTOR
Name	TILIAKOS, MICHAEL
Address	501 7TH AVE 7TH FL
City-State-Zip:	NEW YORK NY 10018

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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: AUSTIN W KING SECRETARY 03/31/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	GLASL, MICHELLE
Address	711 BROADWAY ST STE 400
City-State-Zip:	SAN ANTONIO TX 78215

Title	HEAD OF GROUP TAX
Name	STEFFEK, MATTHEW
Address	711 BROADWAY ST STE 400
City-State-Zip:	SAN ANTONIO TX 78215

Title	DIRECTOR
Name	DONAHUE, CHRISTOPHER
Address	501 7TH AVE 7TH FL
City-State-Zip:	NEW YORK NY 10018

Title	CHIEF INFORMATION SECURITY OFFICER
Name	SCHOFIELD, MICHAEL
Address	711 BROADWAY ST STE 400
City-State-Zip:	SAN ANTONIO TX 78215