

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F23000001424

Entity Name: OMAHA NATIONAL INSURANCE COMPANY**Current Principal Place of Business:**9110 WEST DODGE ROAD
SUITE 300
OMAHA, NE 68114**Current Mailing Address:**PO BOX 451139
OMAHA, NE 68145 US**FEI Number:** 82-1042862**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHEIF FINANCIAL OFFICER
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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 PUFALL, REAGAN
Address 9110 WEST DODGE ROAD
SUITE 300
City-State-Zip: OMAHA NE 68114

Title DIRECTOR
Name BANTA, GEOFFREY
Address 9110 WEST DODGE ROAD
SUITE 300
City-State-Zip: OMAHA NE 68114

Title TREASURER
Name MACKEL, DALE
Address 9110 WEST DODGE ROAD
SUITE 300
City-State-Zip: OMAHA NE 68114

Title CFO
Name MACKEL, DALE
Address 9110 WEST DODGE ROAD
SUITE 300
City-State-Zip: OMAHA NE 68114

Title DIRECTOR
Name DAVIES, NICHOLAS
Address 9110 WEST DODGE ROAD
SUITE 300
City-State-Zip: OMAHA NE 68114

Title DIRECTOR
Name CHOOKASZIAN, DENNIS
Address 9110 WEST DODGE ROAD
SUITE 300
City-State-Zip: OMAHA NE 68114

Title CEO
Name PUFALL, REAGAN
Address 9110 WEST DODGE ROAD
SUITE 300
City-State-Zip: OMAHA NE 68114

Title COO
Name CONNOLLY, BRYAN
Address 9110 WEST DODGE ROAD
SUITE 300
City-State-Zip: OMAHA NE 68114

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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: JAMES A. HEMPEL JR

GENERAL COUNSEL

03/20/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name PUFALL, REAGAN
Address 9110 WEST DODGE ROAD
 SUITE 300
City-State-Zip: OMAHA NE 68114

Title DIRECTOR
Name SILVERMAN, HOWARD SCOTT
Address 9110 WEST DODGE ROAD
 SUITE 300
City-State-Zip: OMAHA NE 68114

Title GENERAL COUNSEL
Name HEMPEL, JAMES A. JR
Address 9110 WEST DODGE ROAD
 SUITE 300
City-State-Zip: OMAHA NE 68114

Title SECRETARY
Name HEMPEL, JAMES A. JR
Address 9110 WEST DODGE ROAD
 SUITE 300
City-State-Zip: OMAHA NE 68114

Title CHIEF SALES & MARKETING OFFICER
Name LAMANTIA, CHRISTOPHER
Address 9110 WEST DODGE ROAD
 SUITE 300
City-State-Zip: OMAHA NE 68114