2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2021
Secretary of State
1074003822CC

DOCUMENT# P21332

Entity Name: MARKEL AMERICAN INSURANCE COMPANY

Current Principal Place of Business:

STATUTORY ACCOUNTING
4521 HIGHWOODS PARKWAY
GLEN ALLEN, VA 23060

Current Mailing Address:

STATUTORY ACCOUNTING
4521 HIGHWOODS PARKWAY
GLEN ALLEN, VA 23060 US

FEI Number: 54-1398877

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	D
Name	SANDERS, BRYAN W.
Address	4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

Title	SRTD, ASSISTANT SECRETARY
Name	DUBOIS, REBECCA S
Address	4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

Title	C
Name	JAEGER, MICHAEL J
Address	4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

Title	DIRECTOR, VP
Name	RUSSO, ROBIN
Address	STATUTORY ACCOUNTING 4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

Title	PRESIDENT
Name	PARKER, MATTHEW H
Address	2000 CHAPEL VIEW BLVD.
City-State-Zip:	CRANSTON RI 02920

Title	DIRECTOR, VP
Name	GUERRERO, OSCAR
Address	4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

Title	VP, ASSISTANT SECRETARY
Name	GRINNAN, RICHARD R.
Address	4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

Title	DIRECTOR, COB
Name	KISCADEN, BRADLEY J
Address	STATUTORY ACCOUNTING 4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

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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: MICHAEL J. JAEGER CONTROLLER 01/11/2021

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	COX, ROBERT C
Address	535 SPRINGFIELD AVENUE 200
City-State-Zip:	SUMMIT NJ 07901

Title	TREASURER
Name	DUFF, APRIL L
Address	STATUTORY ACCOUNTING 4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

Title	VP
Name	CICHON-FENNEY, JOANNE M
Address	10275 WEST HIGGINS ROAD, SUITE 750
City-State-Zip:	ROSEMONT IL 60015

Title	ASSISTANT SECRETARY
Name	LIBERMAN, ELLA
Address	10275 WEST HIGGINS ROAD, SUITE 750
City-State-Zip:	ROSEMONT IL 60015

Title	ASSISTANT TREASURER
Name	BROUSSARD, JUSTIN P
Address	STATUTORY ACCOUNTING 4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

Title	VP, CFO
Name	COSTANZO, BRIAN J
Address	STATUTORY ACCOUNTING 4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

Title	VP
Name	BACK, DAVID J
Address	STATUTORY ACCOUNTING 4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060

Title	SECRETARY
Name	STURGEON, KATHLEEN A.
Address	10275 WEST HIGGINS ROAD, SUITE 750
City-State-Zip:	ROSEMONT IL 60015

Title	ASSISTANT SECRETARY
Name	STRAIT, KARL M
Address	STATUTORY ACCOUNTING 4521 HIGHWOODS PARKWAY
City-State-Zip:	GLEN ALLEN VA 23060