

1.) CORPORATION NAME:

General Security National Insurance Company

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

RICHMOND, VA

DUE DATE: **10/31/2013**

SCC ID NO: **F1173873**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE SEAPORT PLAZA
199 WATER STREET 21ST FLOOR

CITY/ST/ZIP: NY, NY 10038-3526

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	HENRY KLECAN,JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHARMN/P/CEO		
ADDRESS:	199 WATER ST		
	21ST FLOOR		
CITY/ST/ZIP/CO:	NEW YORK, NY 10038-3526		

NAME:	MARK KOCIANCIC	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXEC VP		
ADDRESS:	199 WATER ST		
	21ST FLOOR		
CITY/ST/ZIP/CO:	NEW YORK, NY 10038-3526		

NAME:	MAXINE HILARY VERNE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP/GC/CORP SEC		
ADDRESS:	199 WATER ST		
	21ST FL		
CITY/ST/ZIP/CO:	NEW YORK, NY 10038-3536		

NAME:	PAUL MATTHEW CHRISTOFF	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP/CFO/TREASUR		
ADDRESS:	199 WATER ST., 21ST FLOOR		
CITY/ST/ZIP/CO:	NEW YORK, NY 10038		

NAME:	JEAN PAUL CONOSCENTE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	199 WATER ST., 21ST FLOOR		
CITY/ST/ZIP/CO:	NEW YORK, NY 10038		

NAME: SARAH KRUTOV TITLE: DIRECTOR ADDRESS: 199 WATER ST., 21ST FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10038	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: VICTOR YVES PEIGNET TITLE: DIRECTOR ADDRESS: 199 WATER ST., 21ST FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10038	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PETER RIZACOS TITLE: DIRECTOR ADDRESS: 199 WATER ST., 21ST FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10038	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LEE H ROUTLEDGE TITLE: DIRECTOR ADDRESS: 199 WATER ST., 21ST FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10038	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: EDWARD NATHAN WOLFF TITLE: DIRECTOR ADDRESS: 199 WATER ST CITY/ST/ZIP/CO: NEW YORK, NY 10038-3526	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ MAXINE HILARY VERNE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MAXINE HILARY VERNE, SVP/GC/CORP SEC PRINTED NAME AND CORPORATE TITLE	10/7/2013 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		