

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214515522

1.) CORPORATION NAME:

Omaha Insurance Company

DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS, INC.
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1852229**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: MUTUAL OF OMAHA PLAZA

CITY/ST/ZIP: OMAHA, NE 68175

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: ALAN D BRINKMAN
TITLE: DIRECTOR
ADDRESS: MUTUAL OF OMAHA PLAZA
CITY/ST/ZIP/CO: OMAHA, NE 68175

OFFICER DIRECTOR

NAME: MICHAEL C WEEKLY
TITLE: PRESIDENT
ADDRESS: MUTUAL OF OMAHA PLAZA
CITY/ST/ZIP/CO: OMAHA, NE 68175

OFFICER DIRECTOR

NAME: DAVID A DIAMOND
TITLE: TREASURER
ADDRESS: MUTUAL OF OMAHA PLAZA
CITY/ST/ZIP/CO: OMAHA, NE 68175

OFFICER DIRECTOR

NAME: STEPHEN A AMDOR
TITLE: ASST TREASURER
ADDRESS: MUTUAL OF OMAHA PLAZA
CITY/ST/ZIP/CO: OMAHA, NE 68175

OFFICER DIRECTOR

NAME: MICHAEL E HUSS
TITLE: SECRETARY
ADDRESS: MUTUAL OF OMAHA PLAZA
CITY/ST/ZIP/CO: OMAHA, NE 68175

OFFICER DIRECTOR

NAME: DANIEL P NEARY
TITLE: DIRECTOR
ADDRESS: MUTUAL OF OMAHA PLAZA
CITY/ST/ZIP/CO: OMAHA, NE 68175

OFFICER 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/ MICHAEL C WEEKLY	MICHAEL C WEEKLY, PRESIDENT	3/24/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.