2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F06000004298

ANSUR AMERICA INSURANCE COMPANY



Principal Place of Business

1 MUTUAL AVENUE FRANKENMUTH, MI 48747 Mailing Address

1 MUTUAL AVENUE FRANKENMUTH, MI 48747

FILED May 07, 2008 8:00 am Secretary of State

05-07-2008 90109 011 ***150.00



04082008

No Chg-P

CR2E034 (11/05)

4. FEI Number 38-3467437 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD

DO NOT WRITE

FLANTATION, FL 33324			IN THIS SPACE		
8. The above the obligat	named entity submits this statement for the ptions of registered agent.	ourpose of changing its registered of	office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title in	if applicable. (NOTE: Registered Age	ent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	9 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC ; STANTON, GERALD L 1 MUTUAL AVENUE FRANKENMUTH, MI 48787				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HONOLD, DAVID F 1 MUTUAL AVENUE FRANKENMUTH, MI 48787				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUMMEL, JACK R 1 MUTUAL AVENUE FRANKENMUTH, MI 48787			DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BENSON, JOHN S 1 MUTUAL AVENUE FRANKENMUTH, MI 48787				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILDS, JAMES E 1 MUTUAL AVENUE FRANKENMUTH, MI 48787				
TITLE	VSTD				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS

CITY-ST-ZIP

MCLEOD, BRIAN S

1 MUTUAL AVENUE

FRANKENMUTH, MI 48787

SIGNATURE: But J. Mc food Brian S. McLeod, VP, Secretary & Treasurer SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

ATTACHMENT

2008 Annual Report, State of

Continued 10 & 11

Directors and Principal Officers

Additions/Changes

Title:

V

Name:

Frederick A. Edmond, Jr. Street Address: One Mutual Avenue

City, State, Zip: Frankenmuth, MI 48747

Title:

V

Name:

Randall S. Trinklein Street Address: One Mutual Avenue

City-State-Zip: Frankenmuth, MI 48747

Title:

D

Name:

Morrall M. Claramunt

Street Address: One Mutual Avenue

City-State-Zip: Frankenmuth, MI 48747

Title:

D

Name:

Drew R. Zehnder Street Address: One Mutual Avenue

City-State-Zip: Frankenmuth, MI 48747

Title:

D

Name:

David R. Johnston

Street Address: One Mutual Avenue

City-State-Zip: Frankenmuth, MI 48747

Title:

D

Name:

David A. Pendleton

City-State-Zip: Frankenmuth, MI 48747

Street Address: One Mutual Avenue