

2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 11, 2012
Secretary of State

Entity Name: SUR INSURANCE AGENCY, INC.

Current Principal Place of Business:

101 S PHILLIPS AVE
SIOUX FALLS, SD 571046703

New Principal Place of Business:

Current Mailing Address:

PO BOX 5077
SIOUX FALLS, SD 571175077

New Mailing Address:

101 S PHILLIPS AVE
SIOUX FALLS, SD 571046703

FEI Number: 59-1630046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DIR
Name: BOYSEN, LAWRENCE J
Address: 333 S WABASH AVE
City-St-Zip: CHICAGO, IL 60604

Title: DIR
Name: MENSE, D. CRAIG
Address: 333 S. WABASH AVE
City-St-Zip: CHICAGO, IL 60604

Title: DIR
Name: WELCH, JOHN F
Address: 333 S. WABASH AVE
City-St-Zip: CHICAGO, IL 60604

Title: PRES
Name: BRUFLAT, PAUL T
Address: 101 S. PHILLIPS AVE.
City-St-Zip: SIOUX FALLS, SD 57104

Title: SEC
Name: RIBIKAWSKIS, MARY A
Address: 333 S WABASH AVE
City-St-Zip: CHICAGO, IL 60604

Title: TREA
Name: MIRALLES, ALBERT J JR
Address: 333 S WABASH AVE
City-St-Zip: CHICAGO, IL 60604

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: MARY A. RIBIKAWSKIS

SEC

04/11/2012

Electronic Signature of Signing Officer or Director

Date