2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000001848

Entity Name: FIRST DAKOTA INDEMNITY COMPANY

FILED Jan 03, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

300 CHERAPA PLACE SUITE 401 SIOUX FALLS, SD 57103

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 89310 SIOUX FALLS, SD 571099310

FEI Number: 46-0438963 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD

Name: JOHNSON, RICHARD E Address: 300 CHERAPA PLACE #401 City-St-Zip: SIOUX FALLS, SD 57103

Title: VD

Name: JOHNSON, R. EDWARD
Address: 300 CHERAPA PLACE #401
City-St-Zip: SIOUX FALLS, SD 57103

Title: SD

 Name:
 HOLLAN, ROBERT J

 Address:
 300 CHERAPA PLACE #401

 City-St-Zip:
 SIOUX FALLS, SD 57103

Title: TD

Name: BRANDNER, THEODORE A
Address: 300 CHERAPA PLACE #401
City-St-Zip: SIOUX FALLS, SD 57103

Title: [

 Name:
 KLAAHSEN, LARRY E

 Address:
 300 CHERAPA PLACE #401

 City-St-Zip:
 SIOUX FALLS, SD 57103

Title:

Name: RAU, MYRON

Address: 300 CHERAPA PLACE #401 City-St-Zip: SIOUX FALLS, SD 57103

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: ROBERT J. HOLLAN SVP 01/03/2012