

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90085 029 ****61.25



DOCUMENT # P04863

1. Entity Name

GLEANER LIFE INSURANCE SOCIETY (INCORPORATED)

Principal Place of Business

**5200 WEST U.S. 223
ADRIAN MI 49221**

Mailing Address

**5200 WEST U.S. 223
ADRIAN MI 49221**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE CR2E037 (11/03)

4. FEI Number

38-0580730

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE FL 32399-0000**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **C. HAMMERSMITH, SUANN D**
STREET ADDRESS **13052 CROCKETT HWY**
CITY-ST-ZIP **BLISSFIELD MI 49228**

TITLE **PD** ☐ Delete
NAME **WADE, MICHAEL J.**
STREET ADDRESS **5200 WEST U.S. 223**
CITY-ST-ZIP **ADRIAN MI**

TITLE **ST** ☐ Delete
NAME **PATTERSON, JEFFREY S**
STREET ADDRESS **5200 W US 223**
CITY-ST-ZIP **ADRIAN MI 49221**

TITLE **C** ☐ Delete
NAME **BENNETT, RICHARD**
STREET ADDRESS **7-740 P-3, RT. 5**
CITY-ST-ZIP **NAPOLEON OH 43545**

TITLE **D** ☐ Delete
NAME **WILLS, MARK A**
STREET ADDRESS **1720 S CARBON HILL RD**
CITY-ST-ZIP **COAL CITY IL 60416**

TITLE **D** ☐ Delete
NAME **SUTTON, DAVID E**
STREET ADDRESS **12304 W 165TH**
CITY-ST-ZIP **LOWELL IN 46356**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **7740 County Road P3**
CITY-ST-ZIP **Napoleon, OH 43545**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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.

SIGNATURE:

Michael J. Wade

Michael J. Wade, President

1/23/04

(517) 263-2244

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment

24006872

#P04863

Gleaner Life Insurance Society
5200 West U.S. Hwy. 223
Adrian, MI 49221

We have two more directors that should be listed:

D
Dudley L. Dauterman
14691 Cuckle Creek Rd.
Bowling Green, OH 43402

D
Bill B. Warner
10798 Emerald Drive
Somerset, MI 49281

C