2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2008 8:00 am
Secretary of State
05-07-2008 90109 011 ***150.00

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1. Entity Name
ANSUR AMERICA INSURANCE COMPANY

Principal Place of Business	Mailing Address
1 MUTUAL AVENUE FRANKENMUTH, MI 48747	1 MUTUAL AVENUE FRANKENMUTH, MI 48747

DO NOT WRITE IN THIS SPACE

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

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

DO NOT WRITE IN THIS SPACE

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DC
NAME	STANTON, GERALD L
STREET ADDRESS	1 MUTUAL AVENUE
CITY-ST-ZIP	FRANKENMUTH, MI 48787
TITLE	D
NAME	HONOLD, DAVID F
STREET ADDRESS	1 MUTUAL AVENUE
CITY-ST-ZIP	FRANKENMUTH, MI 48787
TITLE	D
NAME	RUMMEL, JACK R
STREET ADDRESS	1 MUTUAL AVENUE
CITY-ST-ZIP	FRANKENMUTH, MI 48787
TITLE	PD
NAME	BENSON, JOHN S
STREET ADDRESS	1 MUTUAL AVENUE
CITY-ST-ZIP	FRANKENMUTH, MI 48787
TITLE	VD
NAME	WILDS, JAMES E
STREET ADDRESS	1 MUTUAL AVENUE
CITY-ST-ZIP	FRANKENMUTH, MI 48787
TITLE	VSTD
NAME	MCLEOD, BRIAN S
STREET ADDRESS	1 MUTUAL AVENUE
CITY-ST-ZIP	FRANKENMUTH, MI 48787

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Brian S. McLeod Brian S. McLeod, VP, Secretary & Treasurer 4/15/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

40098790

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2008 Annual Report, State of Florida
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
Street Address: One Mutual Avenue
City-State-Zip: Frankenmuth, MI 48747