

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 25, 2009
Secretary of State**

DOCUMENT# F08000004769

Entity Name: MAYFLOWER WOLLAM INSURANCE GROUP, INC.

Current Principal Place of Business:

214 WEST MAIN ST
CORTLAND, OH 44410

New Principal Place of Business:

Current Mailing Address:

PO BOX 790
CORTLAND, OH 44410

New Mailing Address:

FEI Number: 34-0963772 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

USA-RA LLC
841 PRUDENTIAL DRIVE, 12TH FLOOR
JACKSONVILLE, FL 32207 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: P () Delete
Name: PALMER, JOHN E
Address: 253 S. SALEM WARREN RD
City-St-Zip: NORTH JACKSON, OH 44451

Title: V () Delete
Name: TUTTLE, WILLIAM C
Address: 214 WEST MAIN ST
City-St-Zip: CORTLAND, OH 44410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM C TUTTLE

VP

06/25/2009

Electronic Signature of Signing Officer or Director

Date