2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003499

Entity Name: CRANBROOK INSURANCE COMPANY

FILED Mar 09, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

30833 NORTHWESTERN HWY. 30833 NORTHWESTERN HWY.

SUITE 220 SUITE 220

FARMINGTON, MI 48334 FARMINGTON HILLS, MI 48334

Current Mailing Address: New Mailing Address:

30833 NORTHWESTERN HWY. 30833 NORTHWESTERN HWY.

SUITE 220 SUITE 220

FARMINGTON, MI 48334 FARMINGTON HILLS, MI 48334

FEI Number: 31-1674992 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:

CHIEF FINANCIAL OFFICER P.O. BOX 6200 32314-6200 200 E. GAINES ST. TALLAHASSEE, FL 32399 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: MULDOWNEY, DANIEL T

Address: 30833 NORTHWESTERN HWY, SUITE 220

City-St-Zip: FARMINGTON HILLS, MI 48334

Title: T

Name: MARTIN, MICHAEL O

Address: 30833 NORTHWESTERN HWY., STE 220

City-St-Zip: FARMINGTON HILLS, MI 48334

Title: SD

Name: HECKEL, MARILYN A

Address: 30833 NORTHWESTERN HWY., STE 220

City-St-Zip: FARMINGTON HILLS, MI 48334

Title: VD

Name: PRICE, DAVID J

Address: 30833 NORTHWESTERN HWY. SUITE 220

City-St-Zip: FARMINGTON HILLS, MI 48334

Title: VD

Name: CARSON, DONALD R

Address: 30833 NORTHWESTERN HWY, SUITE 220

City-St-Zip: FARMINGTON HILLS, MI 48334

Title: VD

Name: CARSON, DONALD R

Address: 2301 E. LAMAR BOULEVARD, 5TH FLOOR

City-St-Zip: ARLINGTON, TX 76006

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: MICHAEL MARTIN TREA 03/09/2011