2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04863

FILED Apr 04, 2011 Secretary of State

Entity Name: GLEANER LIFE INSURANCE SOCIETY (INCORPORATED)

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

5200 WEST U.S. HIGHWAY 223 ADRIAN, MI 49221 US

Current Mailing Address: New Mailing Address:

5200 WEST U.S. HIGHWAY 223 ADRIAN, MI 49221 US

FEI Number: 38-0580730 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 EXECUTIVE OFFICER 200 E. GAINES ST TALLAHASSEE, FL 32314 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: [

Name: HAMMERSMITH, SUANN D Address: 13052 CROCKETT HWY City-St-Zip: BLISSFIELD, MI 49228

Title: PCEO

 Name:
 STOUT, ELLSWORTH L

 Address:
 5200 WEST U.S. 223

 City-St-Zip:
 ADRIAN, MI 49221

Title: VST

Name: PATTERSON, JEFFREY S

Address: 5200 W US 223 City-St-Zip: ADRIAN, MI 49221

Title:

Name: BENNETT, RICHARD J Address: P708 COUNTY RD 8 City-St-Zip: NAPOLEON, OH 43545

Title:

Name: WILLS, MARK A

Address: 1720 S CARBON HILL RD City-St-Zip: COAL CITY, IL 60416

Title: 0

Name: SUTTON, DAVID E Address: 12304 W 165TH AVE City-St-Zip: LOWELL, IN 46356

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY S. PATTERSON VST 04/04/2011