

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004769

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** MAYFLOWER WOLLAM INSURANCE GROUP, INC.

**Current Principal Place of Business:**

214 WEST MAIN ST  
CORTLAND, OH 44410

**New Principal Place of Business:**

225 S. HIGH STREET  
CORTLAND, OH 44410

**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 ( )

**Name and Address of Current Registered Agent:**

USA-RA LLC  
841 PRUDENTIAL DRIVE, 12TH FLOOR  
JACKSONVILLE, FL 32207 US

**Name and Address of New Registered Agent:**

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  
Name: PALMER, JOHN E  
Address: 253 S. SALEM WARREN RD  
City-St-Zip: NORTH JACKSON, OH 44451

Title: V  
Name: PALMER, MARY J  
Address: 253 S. SALEM-WARREN RD  
City-St-Zip: NORTH JACKSON, OH 44451

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: MARY JEN PALMER

VPRE

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date