

**2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000004769

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

**Current Principal Place of Business:**

253 S. SALEM-WARREN RD  
NORTH JACKSON, OH 44451

**Current Mailing Address:**

PO BOX 248  
NORTH JACKSON, OH 44451 US

**FEI Number: 34-0963772**

**Certificate of Status Desired: No**

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

LEGALINC CORPORATE SERVICES, INC.  
5237 SUMMERLIN COMMONS  
SUITE 400  
FORT MYERS, FL 33907 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

**Officer/Director Detail :**

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

Title V  
Name PALMER, MARY J  
Address 253 S. SALEM-WARREN RD  
City-State-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**

**V PRESIDENT**

**04/01/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date