

**2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04863

**Entity Name:** GLEANER LIFE INSURANCE SOCIETY (INCORPORATED)

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number: 38-0580730**

**Certificate of Status Desired: No**

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

CHIEF EXECUTIVE OFFICER  
200 E. GAINES ST  
TALLAHASSEE, FL 32314 US

**FILED**  
**Sep 18, 2023**  
**Secretary of State**  
**1192119442CC**

*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: KEVIN A. MARTI**

**09/18/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, CEO  
Name            CLARK, ANTHONY SCOTT  
Address        5200 WEST U.S. HIGHWAY 223  
City-State-Zip: ADRIAN MI 49221

Title            AVP, SECRETARY  
Name            PITTMAN, DAVID HIRAM  
Address        5200 WEST U.S. HIGHWAY 223  
City-State-Zip: ADRIAN MI 49221

Title            VICE CHAIRMAN  
Name            WILLS, MARK ALLEN  
Address        1720 S CARBON HILL RD  
City-State-Zip: COAL CITY IL 60416

Title            CHAIRMAN  
Name            GARNER, TERRY LEE  
Address        59533 SATURN DR  
City-State-Zip: SOUTH BEND IN 46614

Title            DIRECTOR  
Name            NOE, MARGARET MS  
Address        740 W MAUMEE ST  
City-State-Zip: ADRIAN MI 49221

Title            DIRECTOR  
Name            SUTTON, DANIEL RAYMOND  
Address        11620 W 165TH AVE  
City-State-Zip: LOWELL IN 46356

Title            DIRECTOR  
Name            CUNNINGHAM, RUSSELL EUGENE  
Address        208 TOWNSHIP RD 14  
City-State-Zip: VAN BUREN OH 45889

Title            AVP  
Name            WEICHEL, LARRY  
Address        5200 WEST U.S. HIGHWAY 223  
City-State-Zip: ADRIAN MI 49221

**Continues on page 2**

*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: DAVID HIRAM PITTMAN**

**AVP, SECRETARY**

**09/18/2023**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name ANDRESEN, STEPHANIE RAE  
Address 5001 N 136 ST  
City-State-Zip: OMAHA NE 68164

Title AVP  
Name LAWRENCE, JUDITH LYNETTE  
Address 5200 WEST U.S. HIGHWAY 223  
City-State-Zip: ADRIAN MI 49221

Title AVP  
Name HAWKEN, AMY JO  
Address 5200 WEST U.S. HIGHWAY 223  
City-State-Zip: ADRIAN MI 49221

Title DIRECTOR  
Name PRICE, JEFFREY  
Address 512 SEAN DR  
City-State-Zip: SHOREWOOD IL 60404

Title VP  
Name REYNOLDS, JAIME LYNN  
Address 5200 WEST U.S. HIGHWAY 223  
City-State-Zip: ADRIAN MI 49221

Title AVP  
Name OSBORN, DAWN MARIE  
Address 5200 WEST U.S. HIGHWAY 223  
City-State-Zip: ADRIAN MI 49221

Title AVP  
Name ZIMMANCK, MICHELLE  
Address 5200 WEST US HIGHWAY 223  
City-State-Zip: ADRIAN MI 49221