2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004298

Entity Name: ANSUR AMERICA INSURANCE COMPANY

Current Principal Place of Business:

ONE MUTUAL AVENUE FRANKENMUTH, MI 48787

Current Mailing Address:

ONE MUTUAL AVENUE

FRANKENMUTH. MI 48787 US

FEI Number: 38-3467437 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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: BRIAN S MCLEOD 04/24/2018

Electronic Signature of Registered Agent

Officer/Director Detail:

Title CHAIRMAN, CEO Title DIRECTOR

BENSON, JOHN S Name Name HONOLD, DAVID F

ONE MUTUAL AVENUE Address ONE MUTUAL AVENUE Address

City-State-Zip: FRANKENMUTH MI 48787 FRANKENMUTH MI 48787 City-State-Zip:

Title VP, TREASURER, SECRETARY, Title DIRECTOR **DIRECTOR**

WILDS, JAMES E Name Name MCLEOD, BRIAN S

Address ONE MUTUAL AVENUE ONE MUTUAL AVENUE Address

City-State-Zip: FRANKENMUTH MI 48787 City-State-Zip: FRANKENMUTH MI 48787

Title PRESIDENT, COO, DIRECTOR Title VΡ

Name EDMOND, FREDERICK A JR. Name MCCAIN, PHILIP J

Address ONE MUTUAL AVENUE Address ONE MUTUAL AVENUE

City-State-Zip: FRANKENMUTH MI 48787 City-State-Zip: FRANKENMUTH MI 48787

Title Title

GILLELAND, BRYAN L Name KNUDSEN, ANDREW H Name ONE MUTUAL AVENUE Address Address ONE MUTUAL AVENUE FRANKENMUTH MI 48787 City-State-Zip:

FRANKENMUTH MI 48787 City-State-Zip:

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

SIGNATURE: BRIAN S. MCLEOD

VP, TREASURER & **SECRETARY**

04/24/2018

FILED Apr 24, 2018

Secretary of State

CC7921213428

Date

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name ZEHNDER, DREW R
Address ONE MUTUAL AVENUE
City-State-Zip: FRANKENMUTH MI 48787

Title DIRECTOR

Name DAVIS, LYLE G JR.
Address ONE MUTUAL AVENUE

City-State-Zip: FRANKENMUTH MI 48787

Title DIRECTOR

Name ROYLES, SUSAN D
Address ONE MUTUAL AVENUE
City-State-Zip: FRANKENMUTH MI 48787

Title VP

Name PINKERTON, MARK L
Address ONE MUTUAL AVENUE
City-State-Zip: FRANKENMUTH MI 48787

Title DIRECTOR

Name PENDLETON, DAVID A
Address ONE MUTUAL AVENUE
City-State-Zip: FRANKENMUTH MI 48787

Title VP

Name KELLY, JAMI M

Address ONE MUTUAL AVENUE
City-State-Zip: FRANKENMUTH MI 48787

Title DIRECTOR

Name MANDEL, SCOTT L
Address ONE MUTUAL AVENUE

City-State-Zip: FRANKENMUTH MI 48787