2014 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

FILED
Apr 15, 2014
Secretary of State
CC6143192366

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 04/15/2014

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CHAIRMAN, CEO
Name	BENSON, JOHN S
Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787

Title	DIRECTOR
Name	WILDS, JAMES E
Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787

Title	PRESIDENT, COO, DIRECTOR
Name	EDMOND, FREDERICK A JR.
Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787

Title	VP
Name	MCCAIN, PHILIP J
Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787

Title	DIRECTOR
Name	HONOLD, DAVID F
Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787

Title	VP, TREASURER, SECRETARY, DIRECTOR
Name	MCLEOD, BRIAN S
Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787

Title	VP
Name	TRINKLEIN, RANDALL S
Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787

Title	VP
Name	GILLELAND, BRYAN L
Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787

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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 04/15/2014

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	VP
Name	KNUDSEN, ANDREW H
Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787

Title	DIRECTOR
Name	CLARAMUNT, MORRALL M
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	ZEHNDER, DREW R
Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787

Title	DIRECTOR
Name	JOHNSTON, DAVID F
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