

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000001797

**Entity Name:** VGM INSURANCE SERVICES, INC.**Current Principal Place of Business:**1111 WEST SAN MARNAN DRIVE  
WATERLOO, IA 50701**Current Mailing Address:**1111WEST SAN MARNAN DRIVE  
WATERLOO, IA 50701 US**FEI Number:** 45-4564147**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 CHAIRMAN  
Name WALSH, JAMES E. JR.  
Address 1111 WEST SAN MARNAN DRIVE  
City-State-Zip: WATERLOO IA 50701

Title TREASURER  
Name MALLARO, MICHAEL A.  
Address 1111 WEST SAN MARNAN DRIVE  
City-State-Zip: WATERLOO IA 50701

Title VC  
Name KLOOS, MICHAEL  
Address 1111 WEST SAN MARNAN DRIVE  
City-State-Zip: WATERLOO IA 50701

Title PRESIDENT  
Name NYGREN, JAMES  
Address 1111 WEST SAN MARNAN DRIVE  
City-State-Zip: WATERLOO IA 50701

Title SECRETARY  
Name SMITH, MARLIES A.  
Address 1111 WEST SAN MARNAN DRIVE  
City-State-Zip: WATERLOO IA 50701

Title ASST. SECRETARY  
Name M Q SERVICES LTD  
Address 1111 WEST SAN MARNAN DRIVE  
City-State-Zip: WATERLOO IA 50701

*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: MARLIES A. SMITH****SECRETARY****03/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date