

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000000316

Entity Name: AMERICAN FAMILY BROKERAGE, INC.**Current Principal Place of Business:**6000 AMERICAN PARKWAY
MADISON, WI 53783**Current Mailing Address:**6000 AMERICAN PARKWAY
MADISON, WI 53783**FEI Number:** 39-1508124**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 ASSISTANT SECRETARY
Name WENZEL, ANN F
Address 6000 AMERICAN PARKWAY
City-State-Zip: MADISON WI 53783

Title SECRETARY, DIRECTOR
Name HOLMAN, DAVID C
Address 6000 AMERICAN PARKWAY
City-State-Zip: MADISON WI 53783

Title PRESIDENT
Name GISI, GREGORY V
Address 6000 AMERICAN PARKWAY
City-State-Zip: MADISON WI 53783

Title ASSISTANT VICE PRESIDENT
Name POST, TODD
Address 6000 AMERICAN PARKWAY
City-State-Zip: MADISON WI 53783

Title TREASURER, DIRECTOR
Name KELLY, DANIEL J
Address 6000 AMERICAN PARKWAY
City-State-Zip: MADISON WI 53783

Title ASST. TREASURER
Name CHIARO, MARTIN T
Address 6000 AMERICAN PARKWAY
City-State-Zip: MADISON WI 53783

Title CHIEF LEGAL OFFICER
Name AFABLE, MARK V
Address 6000 AMERICAN PARKWAY
City-State-Zip: MADISON WI 53783

Title DIRECTOR
Name WESTRATE, WILLIAM B
Address 6000 AMERICAN PARKWAY
City-State-Zip: MADISON WI 53783

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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: ANN F. WENZEL

ASST. SECRETARY

02/29/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	ASST. TREASURER
Name	VAN BEEK, TROY P
Address	6000 AMERICAN PARKWAY
City-State-Zip:	MADISON WI 53783