2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F1300000316

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

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US Certificate of Status Desired: No

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

Officer/Director Detail :

Title	ASSISTANT SECRETARY	Title	TREASURER, DIRECTOR
Name	WENZEL, ANN F	Name	KELLY, DANIEL J
Address	6000 AMERICAN PARKWAY	Address	6000 AMERICAN PARKWAY
City-State-Zip:	MADISON WI 53783	City-State-Zip:	MADISON WI 53783
Title	SECRETARY, DIRECTOR	Title	PRESIDENT
Name	HOLMAN, DAVID C	Name	GISI, GREGORY V
Address	6000 AMERICAN PARKWAY	Address	6000 AMERICAN PARKWAY
City-State-Zip:	MADISON WI 53783	City-State-Zip:	MADISON WI 53783
Title	ASSISTANT VICE PRESIDENT	Title Name	DIRECTOR
Name	POST, TODD	Name	WESTRATE, WILLIAM B
	POST, TODD 6000 AMERICAN PARKWAY		
Name Address	POST, TODD 6000 AMERICAN PARKWAY	Name Address	WESTRATE, WILLIAM B 6000 AMERICAN PARKWAY
Name Address City-State-Zip:	POST, TODD 6000 AMERICAN PARKWAY MADISON WI 53783	Name Address City-State-Zip:	WESTRATE, WILLIAM B 6000 AMERICAN PARKWAY MADISON WI 53783
Name Address City-State-Zip: Title	POST, TODD 6000 AMERICAN PARKWAY MADISON WI 53783 ASST. TREASURER	Name Address City-State-Zip: Title	WESTRATE, WILLIAM B 6000 AMERICAN PARKWAY MADISON WI 53783 ASSISTANT TREASURER
Name Address City-State-Zip: Title Name	POST, TODD 6000 AMERICAN PARKWAY MADISON WI 53783 ASST. TREASURER VAN BEEK, TROY P 6000 AMERICAN PARKWAY	Name Address City-State-Zip: Title Name	WESTRATE, WILLIAM B 6000 AMERICAN PARKWAY MADISON WI 53783 ASSISTANT TREASURER VANG, MAY D

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

ASSISTANT SECRETARY 04/25/2019

Electronic Signature of Signing Officer/Director Detail

FILED Apr 25, 2019 Secretary of State 8125177756CC

Date