

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000002417

**Entity Name:** LIGHTHOUSE INSURANCE GROUP, INC. OF MICHIGAN

**Current Principal Place of Business:**

56 GRANDVILLE AVE SW, STE 300  
GRAND RAPIDS, MI 49503

**Current Mailing Address:**

56 GRANDVILLE AVE SW, STE 300  
GRAND RAPIDS, MI 49503 US

**FEI Number: 38-3249365**

**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 C,D,P  
Name HELMSTETTER, THOMAS  
Address 56 GRANDVILLE AVE SW, STE 300  
City-State-Zip: GRAND RAPIDS MI 49503

Title VP  
Name ROGUS, EVE  
Address 56 GRANDVILLE AVE SW, STE 300  
City-State-Zip: GRAND RAPIDS MI 49503

Title S,T  
Name SCHIPPERS, JAMES  
Address 56 GRANDVILLE AVE SW, STE 300  
City-State-Zip: GRAND RAPIDS MI 49503

*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: THOMAS HELMSTETTER**

**PRESIDENT**

**04/30/2020**

Electronic Signature of Signing Officer/Director Detail

Date