2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F9600003106

Entity Name: FARMLAND MUTUAL INSURANCE COMPANY

FILED Apr 27, 2016 Secretary of State CC1075802411

Current Principal Place of Business:

1100 LOCUST STREET
DES MOINES. IA 50391-1100

Current Mailing Address:

1100 LOCUST STREET

DES MOINES. IA 50391-1100 US

FEI Number: 42-0618271 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 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	PRESIDENT, DIRECTOR	Title	VP, TREASURER
Name	LIGGETT, BRAD R.	Name	LEVINE, KENNETH A.
Address	ONE NATIONWIDE PLAZA	Address	ONE NATIONWIDE PLAZA
City-State-Zip:	COLUMBUS OH 43215	City-State-Zip:	COLUMBUS OH 43215

Title VP, SECRETARY Title EXECUTIVE VICE PRESIDENT, CFO

NameHORNER, ROBERT W. IIINameTHRESHER, MARKR.AddressONE NATIONWIDE PLAZACity-State-Zip:COLUMBUS OH 43215City-State-Zip:COLUMBUS OH 43215

SENIOR VICE PRESIDENT Title Title SENIOR VICE PRESIDENT Name HALLOWELL, HARRY H. BIESECKER, PAMELA A. Name Address ONE NATIONWIDE PLAZA ONE NATIONWIDE PLAZA Address City-State-Zip: COLUMBUS OH 43215 City-State-Zip: COLUMBUS OH 43215

TitleDIRECTORTitleDIRECTORNameTOELLE, MICHAEL J.NameBELL, A. I.

Address ONE NATIONWIDE PLAZA

City-State-Zip: COLUMBUS OH 43215

Address ONE NATIONWIDE PLAZA

City-State-Zip: COLUMBUS OH 43215

Continues on page 2

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: ROBERT W. HORNER, III

SECRETARY

04/27/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameDOUGLAS, GARY A.NamePORTEUS, BRENT R.AddressONE NATIONWIDE PLAZAAddressONE NATIONWIDE PLAZACity-State-Zip:COLUMBUS OH 43215City-State-Zip:COLUMBUS OH 43215

Title DIRECTOR Title DIRECTOR

NameRASMUSSEN, STEPHEN S.NameWEILNAU, SPARKY R.AddressONE NATIONWIDE PLAZAAddressONE NATIONWIDE PLAZACity-State-Zip:COLUMBUS OH 43215City-State-Zip:COLUMBUS OH 43215

Title DIRECTOR Title DIRECTOR

Name BERVEN, MARK A. Name DAVIS, KENNETH D

Address ONE NATIONWIDE PLAZA

City-State-Zip: COLUMBUS OH 43215

Address ONE NATIONWIDE PLAZA

City-State-Zip: COLUMBUS OH 43215

Title ASSOCIATE VICE PRESIDENT AND ASSISTANT Title ASSOCIATE VICE PRESIDENT AND

SECRETARY ASSISTANT SECRETARY

Name HARTMAN, MARK E. Name SHAH, PARAG H.

Address ONE NATIONWIDE PLAZA

City-State-Zip: COLUMBUS OH 43215

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