2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT DOCUMENT# F98000003752

Entity Name: FRANKENMUTH MUTUAL INSURANCE COMPANY

Current Principal Place of Business:

ONE MUTUAL AVENUE FRANKENMUTH, MI 48787

Current Mailing Address:

ONE MUTUAL AVENUE FRANKENMUTH, MI 48787 US

FEI Number: 38-0555290

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	E: JOHN LANG		04/22/2019	
	Electronic Signature of Registered Agent		Date	
Officer/Dire	ctor Detail :			
Title	CHAIRMAN, CEO	Title	DIRECTOR	
Name	BENSON, JOHN S	Name	HONOLD, DAVID F	
Address	ONE MUTUAL AVENUE	Address	ONE MUTUAL AVENUE	
City-State-Zip:	FRANKENMUTH MI 48787	City-State-Zip:	FRANKENMUTH MI 48787	
Title	DIRECTOR	Title	PRESIDENT, COO, DIRECTOR	
Name	WILDS, JAMES E	Name	EDMOND, FREDERICK A JR.	
Address	ONE MUTUAL AVENUE	Address	ONE MUTUAL AVENUE	
City-State-Zip:	FRANKENMUTH MI 48787	City-State-Zip:	FRANKENMUTH MI 48787	
Title	SENIOR VP	Title	SENIOR VP, ACTING SECRETARY	
Name	MCCAIN, PHILIP J	Name	GILLELAND, BRYAN L	
Address	ONE MUTUAL AVENUE	Address	ONE MUTUAL AVENUE	
City-State-Zip:	FRANKENMUTH MI 48787	City-State-Zip:	FRANKENMUTH MI 48787	
Title	SENIOR VP	Title	DIRECTOR	
Name	KNUDSEN, ANDREW H	Name	ZEHNDER, DREW R	
Address	ONE MUTUAL AVENUE	Address	ONE MUTUAL AVENUE	
City-State-Zip:	FRANKENMUTH MI 48787	City-State-Zip:	FRANKENMUTH MI 48787	

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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: JOHN F. LANG

ACTING TREASURER 04/22/2019

Electronic Signature of Signing Officer/Director Detail

FILED Apr 22, 2019 Secretary of State 9664408098CC

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	PENDLETON, DAVID A	Name	DAVIS, LYLE G JR.
Address	ONE MUTUAL AVENUE	Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787	City-State-Zip:	FRANKENMUTH MI 48787
Title	VP	Title	DIRECTOR
Name	KELLY, JAMI M	Name	ROYLES, SUSAN D
Address	ONE MUTUAL AVENUE	Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787	City-State-Zip:	FRANKENMUTH MI 48787
Title	DIRECTOR	Title	VP
Name	MANDEL, SCOTT L	Name	PINKERTON, MARK L
Address	ONE MUTUAL AVENUE	Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787	City-State-Zip:	FRANKENMUTH MI 48787
Title	ACTING TREASURER	Title	VP
Name	LANG, JOHN F	Name	COWARD, STEVEN F
Address	ONE MUTUAL AVENUE	Address	ONE MUTUAL AVENUE
City-State-Zip:	FRANKENMUTH MI 48787	City-State-Zip:	FRANKENMUTH MI 48787