

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 812897

FILED  
Apr 20, 2010  
Secretary of State

**Entity Name:** BROTHERHOOD "MUTUAL" INSURANCE COMPANY

**Current Principal Place of Business:**

6400 BROTHERHOOD WAY  
FT. WAYNE, IN 46825

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2227  
FORT WAYNE, IN 468012227

**New Mailing Address:**

**FEI Number:** 35-0198580

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
P.O. BOX 6200 (32314-6200)  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 US

**Name and Address of New Registered Agent:**

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ROBISON, MARK A  
**Address:** 6400 BROTHERHOOD WAY  
**City-St-Zip:** FT. WAYNE, IN 46825

**Title:** VS  
**Name:** ALLISON, MICHAEL J  
**Address:** 6400 BROTHERHOOD WAY  
**City-St-Zip:** FT. WAYNE, IN 46825

**Title:** V  
**Name:** FIGGINS, SCOTT A  
**Address:** 6400 BROTHERHOOD WAY  
**City-St-Zip:** FT. WAYNE, IN 46825

**Title:** V  
**Name:** PANNABECKER, DARYL G  
**Address:** 6400 BROTHERHOOD WAY  
**City-St-Zip:** FT. WAYNE, IN 46825

**Title:** VT  
**Name:** HIRSCHY, MATTHEW G  
**Address:** 6400 BROTHERHOOD WAY  
**City-St-Zip:** FT. WAYNE, IN 46825

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:** MICHAEL J. ALLISON

VS

04/20/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date