2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#815169

FILED Apr 13, 2010 Secretary of State

Entity Name: AMERICAN REPUBLIC INSURANCE COMPANY

Current Principal Place of Business: New Principal Place of Business:

601 SIXTH AVENUE DES MOINES, IA 50309

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 1 DES MOINES, IA 50334

FEI Number: 42-0113630 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHIEF FINANCIAL OFFICER OF FLORIDA 200 EAST GAINES STREET TALLAHASSEE, FL 323990300 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC

Name: ABBOTT, MICHAEL E
Address: 601 SIXTH AVENUE
City-St-Zip: DES MOINES, IA 50309

Title:

Name: BAINBRIDGE, CRAIG W MD Address: 601 SIXTH AVENUE City-St-Zip: DES MOINES, IA 50309

Title: D

 Name:
 BLAIR, JOSEPH E JR.

 Address:
 601 SIXTH AVENUE

 City-St-Zip:
 DES MOINES, IA 50309

Title: [

 Name:
 EILERS, TOM D

 Address:
 601 SIXTH AVENUE

 City-St-Zip:
 DES MOINES, IA 50309

Title:

 Name:
 GREEN, BRENT B

 Address:
 601 SIXTH AVENUE

 City-St-Zip:
 DES MOINES, IA 50309

Title:

 Name:
 DAVIS, RUSSELL C

 Address:
 601 SIXTH AVENUE

 City-St-Zip:
 DES MOINES, IA 50309

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 C. FITZGERALD VP 04/13/2010