


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Feb 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 828039 (8) 1. Corporation Name WESTERN STAR UNDERWRITERS, INC.		



Principal Place of Business 5600 BEECH TREE LANE PO BOX 2450 GRAND RAPIDS MI 49501	Mailing Address 5600 BEECH TREE LANE PO BOX 2450 GRAND RAPIDS MI 49501
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 5600 BEECH TREE LANE		2a. Mailing Address 26 5600 BEECH TREE LANE		3. Date Incorporated or Qualified 05/30/1972	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 74-1593853	
City & State 23 CALEDONIA MI		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24 49316		Country 25 USA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country 29		Zip 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ISSACSON, ROBERT	1.2 NAME	
STREET ADDRESS	500 BELMONT	1.3 STREET ADDRESS	
CITY-ST-ZIP	FRIENDSWOOD TX	1.4 CITY-ST-ZIP	
TITLE	C <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAINES, KENNETH C	2.2 NAME	
STREET ADDRESS	5600 BEECH TREE LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	CALEDONIA MI	2.4 CITY-ST-ZIP	
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALDEZ, JAMES J	3.2 NAME	
STREET ADDRESS	5600 BEECH TREE LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	CALEDONIA MI	3.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, R J	4.2 NAME	
STREET ADDRESS	5600 BEECH TREE LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX	4.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WLOUDSTRA, F R	5.2 NAME	
STREET ADDRESS	5600 BEECH TREE LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	CALEDONIA MI	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, WILL	6.2 NAME	
STREET ADDRESS	2407 WOODMONT	6.3 STREET ADDRESS	
CITY-ST-ZIP	AUSTIN TX	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  KENNETH C. HAINES
CONTROLLER 01/23/98 (616) 956-3750

CR2E034 (10/97)

WESTERN STAR UNDERWRITERS, INC.

Additional Officers & Directors

<u>TITLE</u>	<u>NAME</u>	<u>STREET ADDRESS</u>	<u>CITY, STATE</u>
D	HANNIGAN, JOHN J.	5600 BEECH TREE LANE	CALEDONIA, MI
D/S	YARED, PAUL D.	5600 BEECH TREE LANE	CALEDONIA, MI