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Feb 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 828414 (3)

1. Corporation Name
FOREMOST FINANCIAL SERVICES CORPORATION

Principal Place of Business
5600 BEECH TREE DRIVE
P O BOX 2450
GRAND RAPIDS MI 49501-2450

Mailing Address
5600 BEECH TREE DRIVE
P O BOX 2450
GRAND RAPIDS MI 49501-2450



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

3. Date Incorporated or Qualified

08/01/1972

3a. Date of Last Report

02/27/1996

4. FEI Number

73-0462770

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ 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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ORANGE, LARRY J
STREET ADDRESS 5600 BEECH TREE LANE
CITY- ST- ZIP CALEDONIA MI ☐ DELETE

TITLE DC
NAME ANTONINI, RICHARD L.
STREET ADDRESS 5600 BEECH TREE LANE
CITY- ST- ZIP CALEDONIA MI ☐ DELETE

TITLE T
NAME WELSH, DONALD D
STREET ADDRESS 5600 BEECH TREE LANE
CITY- ST- ZIP CALEDONIA MI ☐ DELETE

TITLE VS
NAME YARED, PAUL D.
STREET ADDRESS 5600 BEECH TREE LANE
CITY- ST- ZIP CALEDONIA MI ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

see attached
for
additional
officers

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH C. HAINES - CONTROLLER 01/31/97 (616) 956-3750

Date

Daytime Phone #

CR2E034 (9/96)

FOREMOST FINANCIAL SERVICES CORPORATION

Additional Officers/Directors

<u>TITLE</u>	<u>NAME</u>	<u>STREET ADDRESS</u>	<u>CITY, STATE</u>
D	WOUDSTRA, F. ROBERT	5600 BEECH TREE LANE	CALEDONIA, MI
V	BRIZZOLARA, JOSEPH A.	5600 BEECH TREE LANE	CALEDONIA, MI
C	HAINES, KENNETH C.	5600 BEECH TREE LANE	CALEDONIA, MI