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Mar 26 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 # 841430 (2)

1. Corporation Name  
MUTUAL SERVICE LIFE INSURANCE COMPANY

Principal Place of Business  
TWO PINE TREE DRIVE  
ARDEN HILLS MN 55112  
US

Mailing Address  
P.O. BOX 64035  
ST. PAUL MN 55164-0035  
US



2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

FLORIDA STATE INSURANCE COMMISSIONER  
CAPITAL BUILDING  
TALLAHASSEE, FL. FL 32304

3. Date Incorporated or Qualified

09/12/1978

3a. Date of Last Report

04/12/1996

4. FEI Number

41-0203970

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

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 true if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE V ☐ DELETE

NAME GAECKE, ROBERT L.  
STREET ADDRESS 3650 GETTYSBURG AVE. S.  
CITY-ST-ZIP ST. LOUIS PARK MN

TITLE VT ☐ DELETE

NAME ROHDE, STEPHEN L.  
STREET ADDRESS 1966 EDGUMBE ROAD  
CITY-ST-ZIP ST. PAUL MN

TITLE VS ☐ DELETE

NAME ZINN JR, CHESTER A  
STREET ADDRESS 6233 KNOLL DR  
CITY-ST-ZIP EDINA MN

TITLE P ☐ DELETE

NAME VAN HOUTEN, JAMES F.  
STREET ADDRESS 401 SOUTH FIRST STREET, #1811  
CITY-ST-ZIP MINNEAPOLIS MN

TITLE V ☐ DELETE

NAME ALAN P. BLACKWELL  
STREET ADDRESS 12405 88TH PLACE N.  
CITY-ST-ZIP MAPLE GROVE MN 55369

TITLE V ☒ DELETE

NAME POWERS, JOSEPH  
STREET ADDRESS 15375 STANBURY CURVE  
CITY-ST-ZIP EDEN PRAIRIE MN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 4556 Niagara Lane North  
1.4 CITY-ST-ZIP Plymouth, MN 55446

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

V  
Donald M. Gray  
321 Ascot Court  
New Brighton, MN 55112

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 included 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:

*Chester A. Zinn, Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Chester A. Zinn, Jr.

3/13/97

612/631-7010

Date

Daytime Phone #

CR2E034 (9/96)

MUTUAL SERVICE LIFE INSURANCE COMPANY

BOARD OF DIRECTORS

John B. Shaffer  
(Chairman of the Board)  
Shaffer Farms, Inc.  
Route 3, Box 157  
Pipestone, MN 56164

Gasper Kovach, Jr.  
(Vice Chairman of the Board)  
HESCO  
SR 540, P.O. Box K  
Waverly, FL 33877

John Clark Boatman  
Luckey Farmers, Inc.  
1200 W. Main  
Woodville, OH 43469

Burdette L. Frew  
MFA Incorporated  
201 Ray Young Drive  
Columbia, MO 65201

Donald R. Gilles  
Durand Cooperative  
P.O. Box 250, 514 East Main  
Durand, WI 54736

Norman T. Jones  
GROWMARK, Inc.  
1701 Towanda Avenue  
Bloomington, IL 61701

James W. Lenz  
2351 210th Street  
Manson, IA 50563

LeRoy K. Peterson  
Larsen Cooperative Co.  
8283 Co. Hwy. T  
Larsen, WI 54947

Russell B. Porath  
1609 12th Avenue NE  
Watertown, SD 57201

Dixie Lee Riddle  
No. 11106 Moffat Road  
Mead, WA 99021

Philip R. Walker  
Tennessee Farmers Cooperative  
200 Waldron Road  
LaVergne, TN 37086

MUTUAL SERVICE LIFE INSURANCE COMPANY

OFFICERS (cont.)

<u>List of Officers</u>	<u>Title</u>	<u>Address</u>
Alan T. Reiss	V	1827 Park Avenue Mahtomedi, MN 55115
Gilbert F. Wenzel	V	861 Autumn Drive Woodbury, MN 55125