

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

FILED

Feb 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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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 56164-0035
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/12/1978

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23

27

City & State

City & State

24

25

Country

29

30

Country

9. Name and Address of Current Registered Agent

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

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

TITLE ☐ DELETE

**V
NAME
GAECKE, ROBERT L.
STREET ADDRESS
4556 NIAGARA LN NORTH
CITY-ST-ZIP
PLYMOUTH MN**

TITLE ☐ DELETE

**VT
NAME
ROHDE, STEPHEN L.
STREET ADDRESS
1986 EDGCOMBE ROAD
CITY-ST-ZIP
ST. PAUL MN**

TITLE ☒ DELETE

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

TITLE ☐ DELETE

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

TITLE ☐ DELETE

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

TITLE ☐ DELETE

**V
NAME
GRAY, DONALD M
STREET ADDRESS
321 ASCOT CT
CITY-ST-ZIP
NEW BRIGHTON MN**

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

**VS
PINGATORE, JOSEPH J
TWO PINE TREE DR.
ARDEN HILLS, MN**

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

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:

Joseph J. Pingatore

2-17-98

612-631-7794

CR2E034 (10/97)

MUTUAL SERVICE LIFE INSURANCE COMPANY

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
1013 Rollingwoods Lane
Lakeland, FL 33813**

**Norman T. Jones
Six London Court
Bloomington, IL 61704**

**J. Clark Boatman
5811 Star Route 635
Kansas, OH 44841**

**Burdette L. Frew
7480 S. Highway 163
Columbia, MO 65203**

**Donald R. Gilles
1033 Auth Street
Durand, WI 54736**

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

**LeRoy K. Peterson
1918 Wyman Street
New London, WI 54961**

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

**Dixie Lee Riddle
E. 11106 Moffat Road
Mead, WA 99021**

**Philip R. Walker
2603 Airpark Drive
Nashville, TN 37206**

OFFICERS

**Donald M. Gray
Vice President and General Manager,
Reinsured Programs
321 Ascot Court
New Brighton, MN 55112**

**Alan T. Reiss
Vice President, Development
1827 Park Avenue
Mahtomedi, MN 55115**

**Gilbert F. Wenzel
Vice President, Human Resources
861 Autumn Drive
Woodbury, MN 55125**