

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 847986

FILED
Jan 27, 2011
Secretary of State

Entity Name: AMERISURE INSURANCE COMPANY

Current Principal Place of Business:

26777 HALSTED RD
FARMINGTON HILLS, MI 48331586 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 2060
FARMINGTON HILLS, MI 48333060 US

New Mailing Address:

FEI Number: 38-1869912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P.O. BOX 6200 32314-6200
200 E. GAINES ST.
TALLAHASSEE, FL 32399 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VS
Name: VINCENT, SUSAN G
Address: 26777 HALSTED RD
City-St-Zip: FARMINGTON HILLS, MI 48331

Title: CAO
Name: CRABB, GREGORY
Address: 26777 HALSTED ROAD
City-St-Zip: FARMINGTON HILLS, MI 48331

Title: VP
Name: CHIDDICK, GERALD
Address: 26777 HALSTED RD
City-St-Zip: FARMINGTON HILLS, MI 48331

Title: CEO
Name: RUSSELL, RICHARD F
Address: 26777 HALSTED RD
City-St-Zip: FARMINGTON HILLS, MI 48331

Title: CFO
Name: SIMON, MATTHEW
Address: 26777 HALSTED RD
City-St-Zip: FARMINGTON HILLS, MI 48331

Title: VP
Name: MCBRIDE, ANGELA
Address: 26777 HALSTED RD
City-St-Zip: FARMINGTON HILLS, MI 48331

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: SUSAN GAILEY VINCENT

VPS

01/27/2011

Electronic Signature of Signing Officer or Director

Date