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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

2. Principal Place of Business

Sulte, Apt. #, etc

City & State

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Zip

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DOCUMENT # 850421

(9)

2a. Mailing Address

City & State

Suite, Apt. #, etc.

CHURCH MUTUAL INSURANCE COMPANY

Country

9. Name and Address of Current Registered Agent

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TALLAHASSEE FL 32302

MERRILL WI

CITY-ST-ZIP

Capitòl Bldg.

COMMISSIONER OF INSURANCE

clpal Place of Business	Mailing Address
00 Schuster Lane	3000 SCHUSTER LANE
Brrill Wi 54452-3172	MERRILL WI 54452-9172

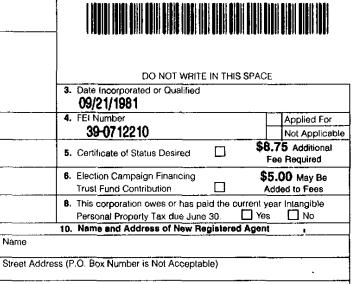
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FILED Apr 29 1998 8:00am Secretary of State



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 tile if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 VD DELETE Change Addition TITLE 1.1 TITLE YOUNG, T J YOUNG, T. J. NAME 1.2 NAME **3000 SCHUSTER LANE** 3000 SCHUSTER LANE STREET ADDRESS 1.3 STREET ADDRESS MERRILL, WISCONSIN 00000 MERRILL WI CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE CLEARY, JOHN F. NAME 2.2 NAME **8000 SCHUSTER LANE** STREET ADDRESS 2.3 STREET ADDRESS **MERRILL, WISCONSIN 00000** CITY-ST-ZIP 2. 4 CITY-ST-ZIP Change DELETE TITLE 3 1 TITLE Addition MARNHOLTZ, J E 3.2 NAME **3000 SCHUSTER LANE** STREET ADDRESS 3.3 STREET ADDRESS MERRILL, WISCONSIN 00000 CITY-ST-ZIP 3.4. CITY-ST-ZIP PCD DELETE Change Addition TITLE 4.1 TITLE NICKEL, D H NAME 4. 2 NAME **3000 SCHUSTER LANE** STREET ADDRESS 4.3 STREET ADDRESS **MERRILL, WISCONSIN 00000** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE VANDER HEIDEN, DANIEL T. VANDERHEIDEN, DANIEL T. NAME 5.2 NAME 3000 SCHUSTER LANE STREET ADDRESS 5.3 STREET ADDRESS 3000 SCHUSTER LANE MERRILL, WISCONSIN 00000 CITY-ST-ZIP 5.4 CITY-ST-ZIP MERRILL AI 54452 DELETE Addition TITLE 6.1 TITLE WILBURN J. WEBER NAME 62 NAME N 1418 NORELL DRIVE STREET ADDRESS 6.3 STREET ADDRESS

Country

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Name

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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.

LI VANDENDEDO

A/20/00 715/526, 5577