

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 852734

FILED
Apr 26, 2011
Secretary of State

Entity Name: AGRI GENERAL INSURANCE SERVICE, INC.

Current Principal Place of Business:

9200 NORTHPARK DR
STE 300
JOHNSTON, IA 50131 US

New Principal Place of Business:

9200 NORTHPARK DRIVE
SUITE 300
JOHNSTON, IA 50131 US

Current Mailing Address:

9200 NORTHPARK DR
STE 300
JOHNSTON, IA 50131 US

New Mailing Address:

9200 NORTHPARK DRIVE
SUITE 300
JOHNSTON, IA 50131 US

FEI Number: 42-1167766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE, FL 32301 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: VPD
Name: GOODE, CHARLES L VPD
Address: 3120 HIGHWOODS BLVD, SUITE 202
City-St-Zip: RALEIGH, NC 27604 US

Title: TCFO
Name: MILLER, RYAN D TCFO
Address: 9200 NORTHPARK DRIVE, SUITE 300
City-St-Zip: JOHNSTON, IA 50131 US

Title: AS
Name: HECKMAN, DIANE L AS
Address: 9200 NORTHPARK DRIVE, SUITE 300
City-St-Zip: JOHNSTON, IA 50131 US

Title: PDCB
Name: HARMS, STEVEN C PDCB
Address: 9200 NORTHPARK DRIVE, SUITE 300
City-St-Zip: JOHNSTON, IA 50131 US

Title: VPD
Name: CARTHEL, STEVEN C VPD
Address: 2201 CIVIC CIRCLE, SUITE 604
City-St-Zip: AMARILLO, TX 79109 US

Title: VPD
Name: LAIRD, BRIAN J VPD
Address: 499 WEST SHAW AVENUE, SUITE 101
City-St-Zip: FRESNO, CA 93704 US

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: RYAN D. MILLER

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04/26/2011

Electronic Signature of Signing Officer or Director

Date