


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

FILED  
Jan 28 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 854790 (3)**  
1. Corporation Name  
**NATIONAL FARMERS UNION STANDARD INSURANCE COMPANY**

Principal Place of Business <b>11800 EAST CORNELL AVENUE AURORA CO 80014-3194 US</b>	Mailing Address <b>11800 EAST CORNELL AVENUE AURORA CO 80014-3194 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country		2a. Mailing Address <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country		3. Date Incorporated or Qualified <b>11/29/1982</b>	
4. FEI Number <b>84-0583213</b>		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		8. <b>\$5.00 May Be Added to Fees</b>	

9. Name and Address of Current Registered Agent

**THE INSURANCE COMMISSIONER  
THE CAPITOL  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

<b>81</b> Name	<b>85</b> Zip Code
<b>82</b> Street Address (P.O. Box Number is Not Acceptable)	
<b>83</b>	
<b>84</b> City <b>FL</b>	

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KRULL, JACOB J</b>	1.2 NAME	
STREET ADDRESS	<b>11900 EAST CORNELL AVENUE</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>AURORA CO</b>	1.4 CITY-ST-ZIP	<b>AURORA, CO 80014-3194</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DANIELS, FRANK C.</b>	2.2 NAME	
STREET ADDRESS	<b>58 VISTA DRIVE</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>BILLINGS MT</b>	2.4 CITY-ST-ZIP	<b>BILLINGS, MT 59102</b>
TITLE	<b>S</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>STEVENSON, WILLIAM B</b>	3.2 NAME	
STREET ADDRESS	<b>11900 EAST CORNELL AVENUE</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>AURORA CO</b>	3.4 CITY-ST-ZIP	<b>AURORA, CO 80014-3194</b>
TITLE	<b>T</b> <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ALLEN, CHARLES D.</b>	4.2 NAME	
STREET ADDRESS	<b>11900 EAST CORNELL AVENUE</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>AURORA CO</b>	4.4 CITY-ST-ZIP	<b>AURORA, CO 80014-3194</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WIESE, DENNIS J</b>	5.2 NAME	
STREET ADDRESS	<b>1410 DAKOTA AVENUE SOUTH</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>HURON SD</b>	5.4 CITY-ST-ZIP	<b>HURON, SD 57350</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CARLSON, ROBERT J</b>	6.2 NAME	
STREET ADDRESS	<b>RURAL ROUTE 1, BOX 64</b>	6.3 STREET ADDRESS	<b>1415 - 12TH AVENUE, SE</b>
CITY-ST-ZIP	<b>GLENBURN ND 58740</b>	6.4 CITY-ST-ZIP	<b>JAMESTOWN, ND 58402-2136</b>

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.

1/12/98 (303) 338-2910

CR2E034 (10/97)

#### ADDITIONAL DIRECTORS

Baranko, Emil W.	HCR1, Box 4	Fairfield, ND 58627
Bergman, Alan	Rural Route, Box 10	Jud, ND 58454
Carter, David E.	10800 E. Bethany Dr.	Aurora, CO 80014-2632
Eblen, David W	Route 1, Box 84	Hillsboro, ND 58045
Kudrna, Robert A.	201 Riverview 4E	Great Falls, MT 59404
Larson, Joseph E.	Box 25	Climax, MN 56523-0025
Olson, Gaylord A.	Route 1	Buxton, ND 58218
Leland H. Swenson	11900 E. Cornell Ave.	Aurora, CO 80014-3194

#### ADDITIONAL OFFICERS (Senior Vice Presidents)

Blumhardt, Rodney S	2375 E. Thistle Ridge Cr.	Littleton, CO 80126
Sparby, Thomas E.	2178 S. Scranton Wy.	Aurora, CO 80014
Svarstad, Claudia J.	18791 E. Colorado Dr.	Aurora, CO 80012
Wentling, P. Malcolm	16568 E. Berry Ln.	Aurora, CO 80015