

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003943

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: SUMMIT REINSURANCE SERVICES, INC.

## Current Principal Place of Business:

1502 MAGNAVOX WAY  
SUITE 120  
FORT WAYNE, IN 46804

## New Principal Place of Business:

7030 POINTE INVERNESS WAY  
SUITE 350  
FORT WAYNE, IN 46804

## Current Mailing Address:

1502 MAGNAVOX WAY  
SUITE 120  
FORT WAYNE, IN 46804

## New Mailing Address:

7030 POINTE INVERNESS WAY  
SUITE 350  
FORT WAYNE, IN 46804

FEI Number: 35-2091145

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: TROUTMAN, MARK R  
Address: 11127 BITTERSWEET DELLS LANE  
City-St-Zip: FORT WAYNE, IN 46814

Title: VTD ( ) Delete  
Name: SHIVELY, BRIAN D  
Address: 2877 W. DOWELL ROAD  
City-St-Zip: COLUMBIA CITY, IN 46725

Title: VD ( ) Delete  
Name: FEHLHABER, BRIAN R  
Address: 12309 MCKAY'S POINTE  
City-St-Zip: FORT WAYNE, IN 46814

Title: VSD ( ) Delete  
Name: STICKELL, ARTHUR L  
Address: 3533 EAST 1200 NORTH  
City-St-Zip: ROANOKE, IN 46783

Title: D ( ) Delete  
Name: ANDERSON, JON C  
Address: 15831 CANYON GLEN PARKWAY  
City-St-Zip: FORT WAYNE, IN 46845

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ANDERSON, JON C  
Address: 15802 GUNNISON RIDGE  
City-St-Zip: HUNTERTOWN, IN 46748

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEPHEN J. WOLFER

CFO

04/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date