

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 02, 2002 8:00 am**  
**Secretary of State**

04-02-2002 90896 043 \*\*\*150.00

062412 AT

<b>DOCUMENT #</b>	<b>F00000004279</b>
<b>1. Entity Name</b> <b>MENNO INSURANCE SERVICE, INC.</b>	

<b>Principal Place of Business</b> <b>1110 NORTH MAIN STREET</b> <b>GOSHEN IN 46528</b>	<b>Mailing Address</b> <b>PO BOX 483</b> <b>GOSHEN IN 46527</b>
---	---

<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

<b>4. FEI Number</b> <b>35-6038806</b>	Applied For <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b> <b>MILLER, JIM</b> <b>3737 BAHIA VISTA ST., #11</b> <b>SARASOTA FL 34232</b>
--

<b>7. Name and Address of New Registered Agent</b> <b>Registered Agents Legal Services, Inc.</b> <b>1333 North Duval Street</b> <b>Tallahassee FL 32302</b>	
--	--

**8. 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 (SEE ATTACHED DOCUMENTATION DATED 1/30/02) DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

<b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)</b> <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2002 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	<b>10. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
--	---	---

<b>11. OFFICERS AND DIRECTORS</b>	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>P BRENNEMAN, HOWARD L</b> <b>720 FOXBRIAR</b> <b>GOSHEN IN 46526</b>
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>V GARBODEN, STEVE</b> <b>701 REVERE DRIVE</b> <b>GOSHEN IN 46526</b>
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>S SOMMERS, KARL C</b> <b>850 WALDEN LANE</b> <b>GOSHEN IN 46526</b>
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>T LIECHTY, JOHN L</b> <b>1403 ASHTON COURT</b> <b>GOSHEN IN 46526</b>
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>C HARDER, BRUCE</b> <b>2555 NE 28TH</b> <b>PORTLAND OR 97212</b>
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>VC SUTER, CAROL</b> <b>7233 NORTH BELLEFONTAINE</b> <b>KANSAS CITY MO 64119</b>

<b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:** Philip R. Zimmerman **3/21/02** **(574) 533-9511**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

ATTACH DOC# F00000004279/524057

## OFFICERS AND DIRECTORS

December 1, 2001

### OFFICERS, Name, Position, Address, Expiration of Term

Howard L. Brenneman, President	720 Foxbriar, Goshen, IN 46526	2002
Steve Garboden, Vice President	701 Revere Drive, Goshen, IN 46526	2002
Karl C. Sommers, Secretary	850 Walden Lane, Goshen, IN 46526	2002
John L. Liechty, Treasurer	1403 Ashton Court, Goshen, IN 46526	2002
Sidney A. Richard, Assist. Vice Pres.	63199 CR 111, Goshen, IN 46526	2002
Marlo J. Kauffman, Assist. Secretary	18396 Northrop Drive, Goshen, IN 46526	2002
Roger Nafziger, Assist. Secretary	423 South 5th Street, Goshen, IN 46526	2002
Philip R. Zimmerman, Assist. Secretary	613 South 7th Street, Goshen, IN 46526	2002
Delmar King, Assist. Treasurer	830 Walden Lane, Goshen, IN 46526	2002
Dale E. Shenk, Assist. Treasurer	59121 CR 29, Goshen, IN 46528	2002

### DIRECTORS, Name, Address, Expiration of Term

John Burkey	2577 "O" Street Road, Milford, NE 68405	2005
Carol L. Duerksen	325 140th Road, Hillsboro, KS 67063	2005
Ken Enns	4572 Avenue 400, Dinuba, CA 93618	2005
David Faber	110 South Wilson, Hillsboro, KS 67063	2003
Natalie Francisco	4505 McRae Close, Chesapeake, VA 23321	2003
Richard Friesen	130 Garmatter Street, Bluffton, OH 45817	2003
Brad Gabel	801 North Garfield Ave, #11, Pasadena, CA 91104	2003
Kathleen Grieser	15500 Greenway Road, Cleveland, OH 44111	2003
Bruce Harder	2555 NE 28th, Portland, OR 97212	2003
Henry D. Landes	1011 Cathill Road, Sellersville PA 18960	2003
Carol J. Suter	7233 North Bellefontaine, Kansas City, MO 64119	2003
Arlan R. Yoder	112 Park Road, Hesston, KS 67062	2005
Gene E. Yoder	1228 Westbrooke Court, Goshen, IN 46528	2005
LaVern Yutzy	219 Audrey Drive, Lititz, PA 17543	2005