## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000005230

Entity Name: MICHIGAN MUTUAL INC.

FILED Jan 08, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 800 MICHIGAN STREET PORT HURON, MI 48060 **Current Mailing Address: New Mailing Address:** 800 MICHIGAN STREET PORT HURON, MI 48060 FEI Number: 38-3092473 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition MCTEVIA, JAMES V PARLOVE, VINCENT A Name: Name: 11300 US HWY 1 UNIT 303 30300 TELEGRAPH RD STE 185 Address: Address: City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: BINGHAMFARMS, MI 48025 Title: Title: ( ) Delete (X) Change ( ) Addition Name: WALKER, MARK M Name: WALKER MARK M 800 MICHIGAN STREET 800 MICHIGAN STREET Address: Address: PORT HURON, MI 48060 City-St-Zip: PORT HURON, MI 48060 City-St-Zip: Title: VPS ( ) Delete Title: () Change () Addition WALKER, HALE H Name: Name: 800 MICHIGAN STREET Address: Address: City-St-Zip: PORT HURON, MI 48060 City-St-Zip: Title: **VPT** () Delete Title: **EVP** (X) Change ( ) Addition CANSFIELD, MICHAEL J CANSFIELD, MICHAEL J Name: Name: Address: 800 MICHIGAN STREET Address: 800 MICHIGAN STREET City-St-Zip: PORT HURON, MI 48060 City-St-Zip: PORT HURON, MI 48060 Title: Title: (X) Change ( ) Addition () Delete Name: SMITH, SHARON M Name: SMITH, SHARON M 800 MICHIGAN STREET Address: 800 MICHIGAN STREET Address: City-St-Zip: PORT HURON, MI 48060 City-St-Zip: PORT HURON, MI 48060

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: MARK M. WALKER CEO 01/08/2009