

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005938

FILED  
Apr 12, 2010  
Secretary of State

**Entity Name:** MIDWEST INSURANCE PARTNERS, INC.

**Current Principal Place of Business:**

200 SOUTH WEST 30TH STREET  
TOPEKA, KS 66611

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 806  
OLEAN, N6 14760

**New Mailing Address:**

**FEI Number:** 74-3104097

**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  
**Name:** BRANCH, LAURIE A  
**Address:** 406 WEST STATE ST  
**City-St-Zip:** OLEAN, NY 14760

**Title:** VD  
**Name:** CHIAPUSO, JOSEPH G  
**Address:** 1729 MOODY HOLLOW ROAD  
**City-St-Zip:** ELDRED, PA 16731

**Title:** SD  
**Name:** BRANCH-BENOLIEL, AMY L  
**Address:** 520 EAST GRAVERS LANE  
**City-St-Zip:** WYNDMOOR, PA 19038

**Title:** TASD  
**Name:** BRANCH, LAURIE A  
**Address:** 304 VAN BUREN AVE.  
**City-St-Zip:** OLEAN, NY 14760

**Title:** D  
**Name:** BRANCH-BENOLIEL, AMY L  
**Address:** 520 GRAVERS LANE  
**City-St-Zip:** WYNDMOOR, PA 19038

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:** LAURIE A BRANCH

PRES

04/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date