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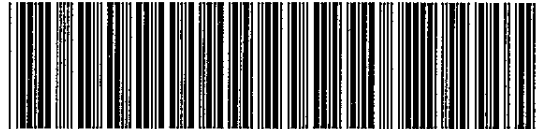
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

MRS
1/25

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: American Community Mutual Insurance Company
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

John Samalik

(Name of Person)

American Community Mutual Insurance Company

(Firm/Company)

39201 Seven Mile Road

(Address)

Livonia, MI 48152-1094

(City/State and Zip code)

For further information concerning this matter, please call:

John Samalik

(Name of Person)

at (734) 591-8063

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 10, 2006

JOHN SAMALIK
AMERICAN COMMUNITY MUTUAL INSURANCE CO.
39201 SEVEN MILE ROAD
LIVONIA, MI 48152-1094

SUBJECT: AMERICAN COMMUNITY MUTUAL INSURANCE COMPANY
Ref. Number: W06000001087

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The designation of the registered agent must be at a Florida street address.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist

Letter Number: 206A00001733

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

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1. American Community Mutual Insurance Company

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Michigan

(State or country under the law of which it is incorporated)

3. 38-1290976

(FEI number, if applicable)

4. July 26, 1947

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 39201 Seven Mile Road, Livonia, MI 48152-1094

(Principal office address)

39201 Seven Mile Road, Livonia, MI 48152-1094

(Current mailing address)

8. Health, Life and Annuity Insurance

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: State of Florida Chief Financial Officer
persuant ch. 624.422 Florida Statutes

Office Address: _____

_____, Florida _____
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Gerald E. Meach

Address: 39201 Seven Mile Road, Livonia, MI 48152

Director: Arthur O. Dummer

Address: 955 East Pioneer Road, Draper, Utah 84020

Director: Andrew M. Jarmel

Address: 39201 Seven Mile Road, Livonia, MI 48152

Director: Joseph A. Nathan

Address: 23 Pine Gate Drive, Bloomfield Hills, MI 48304

Director: Julius A. Otten

Address: 24725 Rockford, Dearborn, MI 48124

Director: J. Paul Perrot

Address: 17663 West Skyline Drive, Surprise, AZ 85374

Director: Thomas Hugh Ritter

Address: 39201 Seven Mile Road, Livonia, MI 48152

Director: Stephen A. Steward, CLU

Address: 3726 New Vision Drive, Ft. Wayne, IN 46854

Director: Michael E. Tobin

Address: 39201 Seven Mile Road, Livonia, MI 48152

B. OFFICERS

President: Gerald E. Meach

Address: 39201 Seven Mile Road, Livonia, MI 48152

Sr. V.P. Peggy A. Briggs

Address: 39201 Seven Mile Road, Livonia, MI 48152

Secretary: Francis P. Dempsey

Address: 39201 Seven Mile Road, Livonia, MI 48152

Treasurer: Michael W. Grandstaff

Address: 39201 Seven Mile Road, Livonia, MI 48152

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Francis P. Dempsey, Sr. Vice President, General Counsel

(Typed or printed name and capacity of person signing application)

ADDENDUM

B. OFFICERS CON'T.

Vice President: Shirley F. Glazier

Address: 39201 Seven Mile Road, Livonia, MI 48152

Vice President: Richard S. Katz

Address: 39201 Seven Mile Road, Livonia, MI 48152

Vice President: Michael A. McCollom

Address: 39201 Seven Mile Road, Livonia, MI 48152

Vice President: Lynn A. Phillips

Address: 39201 Seven Mile Road, Livonia, MI 48152

Vice President: David A. Skup

Address: 39201 Seven Mile Road, Livonia, MI 48152

Vice President: James D. Stults

Address: 39201 Seven Mile Road, Livonia, MI 48152

Vice President: Paul M. Varney

Address: 39201 Seven Mile Road, Livonia, MI 48152

Vice President: Kathleen Walker

Address: 39201 Seven Mile Road, Livonia, MI 48152

CERTIFICATE OF COMPLIANCE

Office of Financial and Insurance Services

Effective Date: November 30, 2005

THIS IS TO CERTIFY, that

AMERICAN COMMUNITY MUTUAL INSURANCE COMPANY
(Michigan mutual insurer)
NAIC No. 60305

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DIVISION OF CORPORATIONS
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is organized under the laws of this State and is authorized to issue policies and transact business under the following Sections of the Insurance Code of 1956, as amended:

Chapter 06 - Section 602 - Life & Annuities

Chapter 06 - Section 606 - Disability



CERTIFIED COPY

November 30, 2005

Marilyn Rzepka

Office of Financial & Insurance Services