2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000267

Entity Name: WELLS FARGO INSURANCE AGENCY OF MICHIGAN, INC.

FILED Apr 27, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

4000 TOWN CENTER SUITE 800 SOUTHFIELD, MI 48075

Current Mailing Address: New Mailing Address:

4000 TOWN CENTER SUITE 800 SOUTHFIELD, MI 48075

FEI Number: 38-1986718 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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

OFFICERS AND DIRECTORS:

Title: DS

Name: GRECO, ROBERT M

Address: 4000 TOWN CENTER SUITE 800 City-St-Zip: SOUTH FIELD, MI 48075

Title: DEVP

Name: BRODERICK, DEBORAH M
Address: 4000 TOWN CENTER SUITE 800
City-St-Zip: SOUTHFIELD, MI 48075

Title: P

 Name:
 ROTHWELL, WILLIAM

 Address:
 4000 TOWN CENTER SUITE 800

 City-St-Zip:
 SOUTHFIELD, MI 48075

Title: T

 Name:
 OSTERMEIER, CHRISTINE

 Address:
 4000 TOWN CENTER SUITE 800

 City-St-Zip:
 SOUTHFIELD, MI 48075

Title: VP

Name: WANROY, P M

Address: 4000 TOWN CENTER SUITE 800
City-St-Zip: SOUTHFIELD, MI 48075

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: ROBERT M. GRECO DS 04/27/2011