

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000698

FILED
Apr 06, 2009
Secretary of State

Entity Name: SFM MUTUAL INSURANCE COMPANY

Current Principal Place of Business:

3500 AMERICAN BLVD W STE 700
BLOOMINGTON, MN 55431

New Principal Place of Business:

Current Mailing Address:

3500 AMERICAN BLVD W STE 700
BLOOMINGTON, MN 55431

New Mailing Address:

FEI Number: 41-1459789 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DC () Delete
Name: JEFFERS, TRUMAN L
Address: 2178 LAKEBROOK DR
City-St-Zip: NEW BRIGHTON, MN 55112

Title: DVC () Delete
Name: MERRIAM, EUGENE R
Address: 12176 BLUEBIRD CIR
City-St-Zip: COON RAPIDS, MN 55448

Title: D () Delete
Name: CLYSDALE, CHARLES E
Address: MAGUIRE AGENCY 1935 W COUNTY RD B2 #241
City-St-Zip: ROSEVILLE, MN 55113

Title: D () Delete
Name: GRUENES, DAVID B
Address: STEARNS ELECTRIC COOP 7341 OLD HWY 52 ST
City-St-Zip: CLOUD, MN 56303

Title: D () Delete
Name: TYLER, F. CLAYTON
Address: 230 TRI TECH OFFICE CENTER 331 SECONDAVE S
City-St-Zip: MINNEAPOLIS, MN 55401

Title: D () Delete
Name: BENIKE, JAMES W
Address: ALVIN E BENIKE, INC. 2960 HWY 14W
City-St-Zip: ROCHESTER, MN 55901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: JEFFERS, TRUMAN L
Address: 2178 LAKEBROOK DR
City-St-Zip: NEW BRIGHTON, MN 55112

Title: MR. (X) Change () Addition
Name: MERRIAM, EUGENE R
Address: 12176 BLUEBIRD CIR
City-St-Zip: COON RAPIDS, MN 55448

Title: MR. (X) Change () Addition
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City-St-Zip: MINNEAPOLIS, MN 55401

Title: MR. (X) Change () Addition
Name: BENIKE, JAMES W
Address: ALVIN E BENIKE, INC. 2960 HWY 14W
City-St-Zip: ROCHESTER, MN 55901

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: TERRENCE L. MILLER

CFO

04/06/2009

Electronic Signature of Signing Officer or Director

_____ Date