2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2010
Secretary of State

DOCUMENT# F09000004785

Entity Name: MID-MICHIGAN INSURANCE AGENCY OF MT. PLEASANT, INC.

Current Principal Place of Business:

2060 EAST REMUS RD
MT PLEASANT, MI 48868

New Principal Place of Business:

2060 EAST REMUS RD
MT PLEASANT, MI 48858

Current Mailing Address:

PO BOX 640
MT PLEASANT, MI 488040640

New Mailing Address:

FEI Number: 38-3407753 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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: CD
Name: BERGMAN, DAVID G
Address: 4882 S LITTLEFIELD ROAD
City-St-Zip: MT PLEASANT, MI 48858

Title: CEO
Name: HAWKINS, MICHAEL L
Address: 6426 E BLANCHARD ROAD
City-St-Zip: SHEPHERD, MI 48883

Title: STD
Name: HAWKINS, MICHAEL L
Address: 6426 E BLANCHARD ROAD
City-St-Zip: SHEPHERD, MI 48883

Title: P
Name: BERGMAN, DANIEL J
Address: 933 W DEERFIELD ROAD
City-St-Zip: MT PLEASANT, MI 48858

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: MICHAEL L. HAWKINS CEO 01/06/2010

Electronic Signature of Signing Officer or Director Date