

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004785

FILED
Jan 07, 2011
Secretary of State

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

Current Principal Place of Business:

2060 EAST REMUS RD
MT PLEASANT, MI 48858

New Principal Place of Business:

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

OFFICERS AND DIRECTORS:

Title: COO
Name: BERGMAN, DAVID G
Address: 4882 S LITTLEFIELD ROAD
City-St-Zip: MT PLEASANT, MI 48858

Title: CEO
Name: HAWKINS, MICHAEL L
Address: 2060 E REMUS ROAD
City-St-Zip: MT PLEASANT, MI 48858

Title: PRES
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

01/07/2011

Electronic Signature of Signing Officer or Director

Date