2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2011
Secretary of State

DOCUMENT# F10000005101

Entity Name: GREAT MIDWEST INSURANCE COMPANY

Current Principal Place of Business:

800 GESSNER, SUITE 600
HOUSTON, TX 77024

New Principal Place of Business:

Current Mailing Address:

800 GESSNER, SUITE 600
HOUSTON, TX 77024

New Mailing Address:

FEI Number: 76-0154296 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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

OFFICERS AND DIRECTORS:

Title: PD
Name: WAY, STEPHEN L
Address: 800 GESSNER, SUITE 600
City-St-Zip: HOUSTON, TX 77024

Title: VP
Name: WALLACH, COOPER B
Address: 800 GESSNER, SUITE 600
City-St-Zip: HOUSTON, TX 77024

Title: VPSD
Name: GANNON, THOMAS R
Address: 800 GESSNER, SUITE 600
City-St-Zip: HOUSTON, TX 77024

Title: TD
Name: MONTGOMERY, RENEE J
Address: 800 GESSNER, SUITE 600
City-St-Zip: HOUSTON, TX 77024

Title: D
Name: DILLINGHAM, GEYNILLE B
Address: 800 GESSNER, SUITE 600
City-St-Zip: HOUSTON, TX 77024

Title: D
Name: KEMP, RHONDA N
Address: 800 GESSNER, SUITE 600
City-St-Zip: HOUSTON, TX 77024

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: THOMAS R GANNON S 04/15/2011

Electronic Signature of Signing Officer or Director — Date