2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2010
Secretary of State

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Entity Name: NATIONWIDE AGRIBUSINESS INSURANCE COMPANY

Current Principal Place of Business:

1100 LOCUST STREET
DES MOINES, IA 503911100

New Principal Place of Business:

1100 LOCUST STREET
DES MOINES, IA 50391

Current Mailing Address:

1100 LOCUST STREET
DES MOINES, IA 503911100

New Mailing Address:

1100 LOCUST STREET
DES MOINES, IA 50391

FEI Number: 42-1015537 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: PDCO
Name: DOUGLAS, GARY A PDIRCOO
Address: ONE NATIONWIDE PLAZA
City-St-Zip: COLUMBUS, OH 43215

Title: SVP
Name: BIESECKER, PAMELA A SVP
Address: ONE NATIONWIDE PLAZA
City-St-Zip: COLUMBUS, OH 43215

Title: EVP
Name: HATLER, PATRICIA R EVP
Address: ONE NATIONWIDE PLAZA
City-St-Zip: COLUMBUS, OH 43215

Title: SEC
Name: HORNER III, ROBERT W SEC
Address: ONE NATIONWIDE PLAZA
City-St-Zip: COLUMBUS, OH 43215

Title: EVPC
Name: HILSHEIMER, LAWRENCE A EVPCFO
Address: ONE NATIONWIDE PLAZA
City-St-Zip: COLUMBUS, OH 43215

Title: DIRC
Name: ZELLERS, JEFFREY W DIRCHRM
Address: ONE NATIONWIDE PLAZA
City-St-Zip: COLUMBUS, OH 43215

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: ANNE MEYER POA 04/14/2010

Electronic Signature of Signing Officer or Director — Date