

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2001 8:00 am
Secretary of State

03-20-2001 90041 045 ***150.00

DOCUMENT # F97000005532

1. Entity Name
MUTUAL INSURANCE CORPORATION OF AMERICA

Principal Place of Business Mailing Address
1301 N. HAGADORN RD. **PO BOX 1471**
EAST LANSING MI 48823 **EAST LANSING MI 48826-1471**

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **38-2102867** Applied For
 Not Applicable

Zip Country Zip Country 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INSURANCE COMMISSIONER
CAPITOL
TALLAHASSEE FL 32399-0300

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DC	<input type="checkbox"/> Delete
NAME	BERGLUND, THOMAS R	
STREET ADDRESS	7901 ANGLING RD., #B-201	
CITY-ST-ZIP	PORTAGE MI 49002	
TITLE	V	<input type="checkbox"/> Delete
NAME	BAUMANN, BILLY B	
STREET ADDRESS	461 W. HURON ST.	
CITY-ST-ZIP	PONTIAC MI 48341	
TITLE	V	<input type="checkbox"/> Delete
NAME	EMERICK, MYRON R	
STREET ADDRESS	35103 SILVANO DR.	
CITY-ST-ZIP	CLINTON TOWNSHIP MI 48035	
TITLE	ST	<input type="checkbox"/> Delete
NAME	PAYNE, THOMAS C MD	
STREET ADDRESS	1800 BRAMBLE DR.	
CITY-ST-ZIP	EAST LANSING MI 48823	
TITLE	D	<input type="checkbox"/> Delete
NAME	HALL, JOHN W MD	
STREET ADDRESS	560 W. MITCHELL	
CITY-ST-ZIP	PETOSKEY MI 49770	
TITLE	D	<input type="checkbox"/> Delete
NAME	VONDERHAAR, WILLIAM P MD	
STREET ADDRESS	1400 WILLOW AVE UNIT 1104	
CITY-ST-ZIP	LOUISVILLE KY 40204	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

SEE ATTACHED

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William B. Cheeseman* William B. Cheeseman Date 517.351-1150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/00)

Attachment Doc# F97000005532

American Physicians Assurance Corporation
Current Board of Directors and Officers

C0035806

William J. Barker

Billy B. Baumann, M.D., Vice Chairman

Thomas R. Berglund, M.D., Chairman

William B. Cheeseman, President

Myron R. Emerick, D.O.

John W. Hall, M.D.,

Stephen H. Haynes, M.D.

AppaRao Mukkamala, M.D.

Thomas C. Payne, M.D.

Dawn E. Springer, M.D.

Thomas E. Stone, M.D.

William P. VonderHaar, M.D.

Frank H. Freund, Treasurer/V.P.*

Monte D. Jahnke, Secretary*

Vice Presidents

Stephen Byrnes

Robert Kellogg

Margo Runkle

Dawn Shattuck

* Officer Only, Not a Director