

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006756

FILED  
Mar 24, 2008  
Secretary of State

Entity Name: MODERN SERVICE INSURANCE COMPANY

## Current Principal Place of Business:

2 PINE TREE DR.  
ARDEN HILLS, MN 55112

## New Principal Place of Business:

## Current Mailing Address:

1701 TOWANDA AVENUE  
BLOOMINGTON, IL 61701

## New Mailing Address:

FEI Number: 41-0944224      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NELSON, PHILIP T  
Address: 1701 TOWANDA AVE  
City-St-Zip: BLOOMINGTON, IL 61701

Title: VP ( ) Delete  
Name: GUEBERT, RICHARD L JR  
Address: 1701 TOWANDA AVE  
City-St-Zip: BLOOMINGTON, IL 61701

Title: CEO ( ) Delete  
Name: BLACKBURN, JOHN  
Address: 1701 TOWANDA AVE  
City-St-Zip: BLOOMINGTON, IL 61701

Title: EVP ( ) Delete  
Name: BAURER, BARBARA A  
Address: 1701 TOWANDA AVE  
City-St-Zip: BLOOMINGTON, IL 61701

Title: SVP ( ) Delete  
Name: MAGERS, DAVID A  
Address: 1701 TOWANDA AVE  
City-St-Zip: BLOOMINGTON, IL 61701

Title: VPC ( ) Delete  
Name: BOROWSKI, PETER J  
Address: 1701 TOWANDA AVE  
City-St-Zip: BLOOMINGTON, IL 61701

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: COO (X) Change ( ) Addition  
Name: BAURER, BARBARA A  
Address: 1701 TOWANDA AVE  
City-St-Zip: BLOOMINGTON, IL 61701

Title: CFO (X) Change ( ) Addition  
Name: MAGERS, DAVID A  
Address: 1701 TOWANDA AVE  
City-St-Zip: BLOOMINGTON, IL 61701

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PETER BOROWSKI

VPC

03/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date