

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003752

FILED  
May 31, 2011  
Secretary of State

**Entity Name:** FRANKENMUTH MUTUAL INSURANCE COMPANY

**Current Principal Place of Business:**

ONE MUTUAL AVENUE  
FRANKENMUTH, MI 48787

**New Principal Place of Business:**

ONE MUTUAL AVENUE  
FRANKENMUTH, MI 48787 US

**Current Mailing Address:**

ONE MUTUAL AVENUE  
FRANKENMUTH, MI 48787

**New Mailing Address:**

ONE MUTUAL AVENUE  
FRANKENMUTH, MI 48787 US

**FEI Number:** 38-0555290

**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 32399 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: DC  
Name: STANTON, GERALD L  
Address: ONE MUTUAL AVENUE  
City-St-Zip: FRANKENMUTH, MI 48787 US

Title: PD  
Name: BENSON, JOHN S  
Address: ONE MUTUAL AVENUE  
City-St-Zip: FRANKENMUTH, MI 48787 US

Title: VD  
Name: HONOLD, DAVID F  
Address: ONE MUTUAL AVENUE  
City-St-Zip: FRANKENMUTH, MI 48787 US

Title: VD  
Name: WILDS, JAMES E  
Address: ONE MUTUAL AVENUE  
City-St-Zip: FRANKENMUTH, MI 48787 US

Title: VSTD  
Name: MCLEOD, BRIAN S  
Address: ONE MUTUAL AVENUE  
City-St-Zip: FRANKENMUTH, MI 48787 US

Title: VD  
Name: EDMOND, FREDERICK A JR  
Address: ONE MUTUAL AVENUE  
City-St-Zip: FRANKENMUTH, MI 48787 US

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: BRIAN S. MCLEOD

VSTD

05/31/2011

Electronic Signature of Signing Officer or Director

Date