


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 19, 2004 8:00 am**  
**Secretary of State**

03-19-2004 90048 018 \*\*\*150.00

**DOCUMENT # G59336**  
 1. Entity Name  
**AMERICAN FEDERATION INSURANCE COMPANY**



Principal Place of Business  
**5600 BEECH TREE LANE  
 GRAND RAPIDS, MI 49316 US**

Mailing Address  
**5600 BEECH TREE LANE  
 P.O. BOX 2450  
 GRAND RAPIDS, MI 49501-2450 US**

**54020083**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

Zip Country



03082004 Chg-P CR2E034 (10/03)

4. FEI Number  
**59-2326047**

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**CHIEF FINANCIAL OFFICER  
 P O BOX 6200 (32314-6200)  
 200 E. GAINES ST  
 TALLAHASSEE, FL 32399-0000**

**7. Name and Address of New Registered Agent**

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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEAMAN, STEPHEN J 4700 WILSHIRE BLVD LOS ANGELES, CA 90010	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOSHOVEN, STEPHEN J 5600 BEECH TREE LANE CALEDONIA, MI 49316	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOD WOUDSTRA, F. ROBERT 5600 BEACH TREE LN CALEDONIA, MI 49316	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HANNIGAN, JOHN J. 5600 BEECH TREE LANE CALEDONIA, MI	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JOHNSON, JOHN E 5600 BEECH TREE LANE CALEDONIA, MI 49316	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOYNER, RONNIE E 5600 BEECH TREE LANE CALEDONIA, MI 49316	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Treul, Nancy H 5600 Beech Tree Lane Caledonia, MI 49316	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Troutman, Edward L 5600 Beech Tree Lane Caledonia, MI 49316	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Woudstra, F Robert 5600 Beech Tree Lane Caledonia, MI 49316	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S/AGC Brown, Martin R 5600 Beech Tree Lane Caledonia, MI 49316	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/AT Wauthier, Pierre C 4680 Wilshire Blvd Los Angeles CA 90010	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Feinstein, Martin D 4680 Wilshire Blvd Los Angeles CA 90010	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Jeffrey L Pepper* **Jeffrey L Pepper, Treasurer** 3-10-04 (616) 956-3750  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

54020083

American Federation Insurance Company  
Additional Officers & Directors

G59336

<u>Title</u>	<u>Name</u>	<u>Street Address</u>	<u>City, State</u>
V	Jason L Katz	4680 Wilshire Blvd	Los Angeles, CA 90010
V	Cynthia A Mc Lane	5600 Beech Tree Lane	Caledonia, MI 49316
V	David J Kelly	4680 Wilshire Blvd	Los Angeles, CA 90010
V	Lynn Mc Daniel	5600 Beech Tree Lane	Caledonia, MI 49316
T	Jeffrey L Peper	5600 Beech Tree Lane	Caledonia, MI 49316
AS	Doren E Hohl	4680 Wilshire Blvd	Los Angeles, CA 90010
AT	Ronald G Mayhan	4680 Wilshire Blvd	Los Angeles, CA 90010
AT	Hubert L Mountz	4680 Wilshire Blvd	Los Angeles, CA 90010
D	Stanley R Smith	4680 Wilshire Blvd	Los Angeles, CA 90010