


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2005 8:00 am
Secretary of State

03-07-2005 90254 042 ***150.00

DOCUMENT # P01000059067 1. Entity Name FOREMOST EXPRESS INSURANCE AGENCY OF FLORIDA, INC.	
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Principal Place of Business 5600 BEECH TREE LN. GRAND RAPIDS, MI 49501	Mailing Address 5600 BEECH TREE LN. GRAND RAPIDS, MI 49501
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DO NOT WRITE IN THIS SPACE

02232005 No Chg-P CR2E034 (10/03)

4. FEI Number 38-3618037	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525
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IN THIS SPACE

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 _____	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HANNIGAN, JOHN J ✓ 5600 BEECH TREE LN. GRAND RAPIDS, MI 49501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOULDSTRA, F. ROBERT ✓ 5600 BEECH TREE LN. GRAND RAPIDS, MI 49501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JOYNER, RONNIE L ✓ 5600 BEECH TREE LN. GRAND RAPIDS, MI 49501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TREUL, NANCY H ✓ 5600 BEECH TREE LN. GRAND RAPIDS, MI 49501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOSHoven, STEVEN ✓ 4680 WILSHIRE BLVBD. LOS ANGELES, CA 90010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GOEDELMA, MICHAEL KENT ✓ 3920 SEA EAGLE CIR. ST. AUGUSTINE, FL 32086

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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, Treasurer 2-25-05 (616) 956-3750
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>

ATTACHMENT

40026759

Foremost Express Insurance Agency of Florida, Inc
Additional Officers & Directors

#P01000059067

<u>Title</u>	<u>Name</u>	<u>Street Address</u>	<u>City, State</u>
Assistant Treasurer	Ronald Myhan	4680 Wilshire Blvd	Los Angeles, CA
Assistant Treasurer	Hubert Mountz	4680 Wilshire Blvd	Los Angeles, CA
Assistant Secretary	Doren E Hohl	4680 Wilshire Blvd	Los Angeles, CA
Vice President	Nora L Ruder	5600 Beech Tree Lane	Caledonia, MI
Vice President	Kurt Sanders	5600 Beech Tree Lane	Caledonia, MI
Vice President	Stanley R Smith	5600 Beech Tree Lane	Caledonia, MI
Treasurer	Jeffrey L Pepper	5600 Beech Tree Lane	Caledonia, MI
Secretary	Martin R Brown	5600 Beech Tree Lane	Caledonia, MI