

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90053 021 ****61.25

60005356



DOCUMENT # P04863 1. Entity Name GLENER LIFE INSURANCE SOCIETY (INCORPORATED)					
Principal Place of Business 5200 WEST U.S. 223 ADRIAN, MI 49221			Mailing Address 5200 WEST U.S. 223 ADRIAN, MI 49221		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 38-0580730			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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMMERSMITH, SUANN D 13052 CROCKETT HWY BLISSFIELD, MI 49228 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WADE, MICHAEL J. 5200 WEST U.S. 223 ADRIAN, MI ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PATTERSON, JEFFREY S 5200 W US 223 ADRIAN, MI 49221 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S/T ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C BENNETT, RICHARD 7740 COUNTY RD. P3 NAPOLEON, OH 43545 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	13 LAKEVIEW DR. NAPOLEON, OH 43545 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLS, MARK A 1720 S CARBON HILL RD COAL CITY, IL 60416 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUTTON, DAVID E 12304 W 165TH LOWELL, IN 46356 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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:		MICHAEL J. WADE		1/11/06 (517) 263-2244	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

ATTACHMENT

Gleaner Life Insurance Society
5200 West U.S. Hwy. 223
Adrian, Michigan 49221

60005356
#004863

We have two more directors that should be listed. Please note the following:

D
Dudley L. Dauterman
14691 Cuckle Creek Rd.
Bowling Green, OH 43402

D
Bill B. Warner
34 Club House Lane
Sebring, FL 33876