

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04863

FILED
Apr 04, 2011
Secretary of State

Entity Name: GLEANER LIFE INSURANCE SOCIETY (INCORPORATED)

Current Principal Place of Business:

5200 WEST U.S. HIGHWAY 223
ADRIAN, MI 49221 US

New Principal Place of Business:

Current Mailing Address:

5200 WEST U.S. HIGHWAY 223
ADRIAN, MI 49221 US

New Mailing Address:

FEI Number: 38-0580730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF EXECUTIVE OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 32314 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: D
Name: HAMMERSMITH, SUANN D
Address: 13052 CROCKETT HWY
City-St-Zip: BLISSFIELD, MI 49228

Title: PCEO
Name: STOUT, ELLSWORTH L
Address: 5200 WEST U.S. 223
City-St-Zip: ADRIAN, MI 49221

Title: VST
Name: PATTERSON, JEFFREY S
Address: 5200 W US 223
City-St-Zip: ADRIAN, MI 49221

Title: D
Name: BENNETT, RICHARD J
Address: P708 COUNTY RD 8
City-St-Zip: NAPOLEON, OH 43545

Title: D
Name: WILLS, MARK A
Address: 1720 S CARBON HILL RD
City-St-Zip: COAL CITY, IL 60416

Title: C
Name: SUTTON, DAVID E
Address: 12304 W 165TH AVE
City-St-Zip: LOWELL, IN 46356

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY S. PATTERSON

VST

04/04/2011

Electronic Signature of Signing Officer or Director

Date