


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90092 036 ***150.00

DOCUMENT # P06227		
1. Entity Name MERCHANTS BONDING COMPANY (MUTUAL)		

Principal Place of Business 2100 FLEUR DRIVE DES MOINES, IA 50321 US	Mailing Address 2100 FLEUR DRIVE DES MOINES, IA 50321 US
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40014539

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01252007 Chg-P CR2E034 (12/06)

4. FEI Number 42-0410010	Applied For 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	
MILLS JR, E.A. SETH ESQ. 100 N TAMPA STREET, #2010 TAMPA, FL 33602	

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 <u>E.A. SETH JR</u>	DATE <u>1/31/2007</u>
<small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR, JEFFREY W 105 ORTONS POINT PL CARY, NC 27513 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 531 S. 26th Street West Des Moines, IA 50265
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WARNER, WILLIAM W JR 3917 155TH STREET URBANDALE, IA 50323 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEKOCK, EDWIN L 505 MAPLE STREET PELLA, IA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR, WILLIAM N 5115 S KENTON WAY ENGLEWOOD, CO 80111 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR, LLOYD 400 FOSTER DR DES MOINES, IA 50312 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR, JANET 400 FOSTER DR DES MOINES, IA 50312 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 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: <u>Edwin L. DeKock</u>	DATE: <u>2/6/07</u> DAYTIME PHONE: <u>515-243-8711</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	

ATTACHMENT
40014539
#806227

OFFICERS AND DIRECTORS (CONTINUED)

TITLE	PD
NAME	Taylor, Larry
STREET ADDRESS	4710 Mills Civic Pkwy, Unit 1401
CITY - ST - ZIP	West Des Moines, Iowa 50265
TITLE	D
NAME	Warner, Melissa Ann
STREET ADDRESS	3530 Arapahoe
CITY - ST - ZIP	Des Moines, Iowa 50312-1158