

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26985

FILED
Feb 01, 2011
Secretary of State

Entity Name: LAURIER INDEMNITY COMPANY

Current Principal Place of Business:

LAURIER INDEMNITY COMPANY
111 W. MICHIGAN ST.
MILWAUKEE, WI 532032903 US

New Principal Place of Business:

GROUND TRANSPORTATION CENTER
425 2ND ST, STE 1010
CEDAR RAPIDS, IA 52401 US

Current Mailing Address:

LAURIER INDEMNITY COMPANY
111 W. MICHIGAN ST.
MILWAUKEE, WI 532032903 US

New Mailing Address:

ATTN: TAX DEPARTMENT
P.O. BOX 3646
OMAHA, NE 681030646 US

FEI Number: 58-1811419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: PTD
Name: MENZIES, STEVEN
Address: 10805 OLD MILL ROAD
City-St-Zip: OMAHA, NE 68154 US

Title: SD
Name: SILVER, JEFFREY
Address: 10805 OLD MILL ROAD
City-St-Zip: OMAHA, NE 68154 US

Title: D
Name: FERENC, SIDNEY
Address: 10805 OLD MILL ROAD
City-St-Zip: OMAHA, NE 68154 US

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

SIGNATURE: STEVEN MENZIES

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02/01/2011

Electronic Signature of Signing Officer or Director

Date