

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000001797

Entity Name: VGM INSURANCE SERVICES, INC.

Current Principal Place of Business:

1111 VAN MILLER WAY
WATERLOO, IA 50701

Current Mailing Address:

PO BOX 1328
WATERLOO, IA 50704 US

FEI Number: 45-4564147

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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

Officer/Director Detail :

Title TREASURER
Name ANDERSON, BARBARA
Address 1111 VAN MILLER WAY
City-State-Zip: WATERLOO IA 50701

Title SECRETARY
Name WENDLAND, CHRIS
Address 1111 VAN MILLER WAY
City-State-Zip: WATERLOO IA 50701

Title DIRECTOR
Name ELLIS, D JAY
Address 1111 VAN MILLER WAY
City-State-Zip: WATERLOO IA 50701

Title CEO
Name STOLZ, JEREMY
Address 1111 VAN MILLER WAY
City-State-Zip: WATERLOO IA 50701

Title DIRECTOR
Name PHILLIPS, JIM
Address 1111 VAN MILLER WAY
City-State-Zip: WATERLOO IA 50701

Title DIRECTOR
Name ADAMS, JOHN
Address 1111 VAN MILLER WAY
City-State-Zip: WATERLOO IA 50701

Title DIRECTOR
Name DEERY JR., JOHN
Address 1111 VAN MILLER WAY
City-State-Zip: WATERLOO IA 50701

Title DIRECTOR
Name ANFINSON, LARRY
Address 1111 VAN MILLER WAY
City-State-Zip: WATERLOO IA 50701

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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: CHRIS WENDLAND

SECRETARY

01/28/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MALLARO, MICHAEL A.
Address 1111 VAN MILLER WAY
City-State-Zip: WATERLOO IA 50701