## 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14915

**Entity Name: ALFA MUTUAL INSURANCE COMPANY** 

**Current Principal Place of Business:** 

2108 E. S. BLVD.

MONTGOMERY. AL 36116-2410

**Current Mailing Address:** 

PO BOX 11189

MONTGOMERY, AL 36111-0189

FEI Number: 63-0262164 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST

TALLAHASSEE, FL 32399-0000 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

**FILED** Apr 27, 2015

**Secretary of State** 

CC6012620349

Officer/Director Detail :

Title **SECRETARY** Title PRESIDENT, CEO, DIRECTOR

COONER, ANGELA L PARNELL, JAMES L Name Name 2108 E. SOUTH BLVD 2108 E. SOUTH BLVD. Address Address MONTGOMERY AL 36116 MONTGOMERY AL 36116 City-State-Zip: City-State-Zip:

Title TREASURER, DIRECTOR Title VP, DIRECTOR

Name DUNN, STEVE WYSNER, DEAN Name

Address 2108 E. SOUTH BLVD. Address 2108 E. SOUTH BLVD. MONTGOMERY AL 36116 City-State-Zip: MONTGOMERY AL 36116 City-State-Zip:

Title VΡ Title VP, DIRECTOR

Name NICKLES, JEFFREY Name VAUGHN. REX Address 2108 E SOUTH BLVD 2108 E. SOUTH BLVD. Address

City-State-Zip: MONTGOMERY AL 36116 MONTGOMERY AL 36116 City-State-Zip:

Title VP. DIRECTOR Title VP, DIRECTOR Name JEFFCOAT, GEORGE HARPER, JAKE Name Address 2108 E. S. BLVD.

2108 E. S. BLVD. Address

City-State-Zip: MONTGOMERY AL 36116-2410 MONTGOMERY AL 36116-2410 City-State-Zip:

## Continues on page 2

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: JEFFREY NICKLES

JNICKLES@ALFAINS.COM 04/27/2015

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title ASST TREASURER

Name RUTLEDGE, STEPHEN G

Address 2108 E. S. BLVD.

City-State-Zip: MONTGOMERY AL 36116-2410