No. <b>C 125489</b>		Due no later than Sep 30, 2015		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.  FARMERS CROP INSURANCE ALLIANCE, INC. ROBERT ZBACNIK 301 E 4TH ST 15TH FLOOR CINCINNATI OH 45202-4201  C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705  3. New Registered Agent Signature:*						
4. Corporations: Enter Nar	mes and Busin	ess Addresses	of President, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	TIMOTHY C WEBER		301 E. 4TH ST	CINCINNATI	OH	USA	45202	
SECRETARY	Y EVE CUTLER		301 E. 4TH ST	CINCINNATI	OH	USA	45202	
DIRECTOR	CTOR RONALD J B		301 E. 4TH ST	CINCINNATI	OH	USA	45202	
DIRECTOR	DONALD D I	ARSON	301 E. 4TH ST	CINCINNATI	ОН	USA	45202	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
KS		Signature: Robert J Zbacnik		Date: 0	Date: 08/06/2015			
C 125489		Name (type	e or print): Robert J Zbacnik	Title: A	Title: Assistant Treasurer			
Processed 08/06/2015		* Electronically provided signatures are accepted as original signatures.						