

No. C 201984		Due no later than Apr 30, 2016 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. MIDWEST INSURANCE CORPORATION SHANA MEDDERS PO BOX 58 NEVADA IA 50201		BILL DEAL 700 W STATE ST 3RD FL IDAHO DEPARTMENT OF INSURANCE BOISE ID 83702			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	DON S MOODY	415 S 11TH ST	NEVADA	IA	USA	50201	
DIRECTOR	RANDALL V HERTZ	415 S 11TH ST	NEVADA	IA	USA	50201	
TREASURER	TOM HERTZ	415 S 11TH ST	NEVADA	IA	USA	50201	
DIRECTOR	LLOYD BROWN	415 S 11TH ST	NEVADA	IA	USA	50201	
DIRECTOR	JOEL HERTZ	415 S 11TH ST	NEVADA	IA	USA	50201	
DIRECTOR	MONTE BULLOCK	415 S 11TH ST	NEVADA	IA	USA	50201	
SECRETARY	CHAD HERTZ	415 S 11TH ST	NEVADA	IA	USA	50201	
5. Organized Under the Laws of: IA C 201984		6. Annual Report must be signed.* Signature: Monte Bullock Name (type or print): Monte Bullock Date: 02/25/2016 Title: Director					
Processed 02/25/2016 * Electronically provided signatures are accepted as original signatures.							