

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07733

Entity Name: FARMERS MUTUAL HAIL INSURANCE COMPANY OF IOWA

Current Principal Place of Business:

6785 WESTOWN PKWY
WEST DES MOINES, IA 50266

Current Mailing Address:

6785 WESTOWN PKWY
WEST DES MOINES, IA 50266

FEI Number: 42-0245840

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
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

Officer/Director Detail :

Title P
Name RUTLEDGE, RONALD P
Address 15802 BROOKVIEW DR
City-State-Zip: URBANDALE IA 50323

Title C
Name RUTLEDGE, STEVEN C
Address 3421 BRIAR RIDGE
City-State-Zip: WEST DES MOINES IA 50265

Title S
Name RUTLEDGE, SHANNON D
Address 726 STONEGATE CT SW
City-State-Zip: ALTOONA IA 50009

Title CFO
Name ROGGENBURG, DARIN L
Address 2035 NW 134TH ST
City-State-Zip: CLIVE IA 50325

Title D
Name RAIFE, BARBARA R
Address 3627 COTTAGE GROVE
City-State-Zip: DES MOINES IA 50311

Title D
Name RUTLEDGE, SCOTT
Address 1501 BUFFALO RD
City-State-Zip: WEST DES MOINES IA 50265

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: DARIN L ROGGENBURG

CFO & TREASURER

02/24/2013

Electronic Signature of Signing Officer/Director Detail

Date