

1.) CORPORATION NAME:

**Amerisure Mutual Insurance Company**

DUE DATE: **12/31/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY**

**RICHARD A SAUNDERS**

**6160 KEMPSVILLE CIR**

**SMITHFIELD BLDG STE 341-B**

**NORFOLK, VA 23502**

SCC ID NO: **F0081564**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,001,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**NORFOLK CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MI**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 26777 HALSTED ROAD

CITY/ST/ZIP: FARMINGTON HILLS, MI 48331-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RICHARD F RUSSELL	
TITLE:	P/CEO	
ADDRESS:	6295 BLOOMFIELD GLENS	
CITY/ST/ZIP/CO:	W BLOOMFIELD, MI 48322-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KAREN BATCHELOR	
TITLE:	DIRECTOR	
ADDRESS:	26116 WYOMING	
CITY/ST/ZIP/CO:	HUNTINGTON WOODS, MI 48070-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ROBERT K BURGESS	
TITLE:	DIRECTOR	
ADDRESS:	39420 N TOM MORRIS RD	
CITY/ST/ZIP/CO:	SCOTTSDALE, AZ 85262-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	CHARLES B COE	
TITLE:	DIRECTOR	
ADDRESS:	2000 HERON ISLAND WAY	
CITY/ST/ZIP/CO:	WADMALAW ISLAND, SC 29487-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DENNIS R HERRICK	
TITLE:	DIRECTOR	
ADDRESS:	3601 WEST THIRTEEN MILE ROAD	
CITY/ST/ZIP/CO:	ROYAL OAK, MI 48073-6769	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PHILLIP E LOVE, JR DIRECTOR 724 KNOX ABBOTT DRIVE CAYCE, SC 29033-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES B NICHOLSON DIRECTOR 10900 HARPER AVENUE DETROIT, MI 48213-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS A PLAYER DIRECTOR 1600 ATLANTA FINANCIAL CENTER 3343 PEACHTREE RD NE ATLANTA, GA 30326-1044	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BETTINA M WHYTE DIRECTOR 600 LEXINGTON AVENUE NEW YORK, NY 10022-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAMELA A BURGESS VICE PRESIDENT 26777 HALSTED ROAD FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GERALD CHIDDICK VICE PRESIDENT 26777 HALSTED ROAD FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGORY J CRABB VICE PRESIDENT 26777 HALSTED ROAD FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL M DIETERLE VICE PRESIDENT 26777 HALSTED ROAD FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANIEL GRAF VICE PRESIDENT 26777 HALSTED ROAD FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANGELA M MCBRIDE VICE PRESIDENT 26777 HALSTED ROAD FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: MICHAEL S O'ROURKE TITLE: VICE PRESIDENT ADDRESS: 26777 HALSTED ROAD CITY/ST/ZIP/CO: FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: MATTHEW J SIMON TITLE: VICE PRESIDENT ADDRESS: 26777 HALSTED ROAD CITY/ST/ZIP/CO: FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: DON A SMITH TITLE: VICE PRESIDENT ADDRESS: 26777 HALSTED ROAD CITY/ST/ZIP/CO: FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: SUSAN GAILEY VINCENT TITLE: SECRETARY ADDRESS: 26777 HALSTED ROAD CITY/ST/ZIP/CO: FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: EDWARD "TED" WAGNER TITLE: VICE PRESIDENT ADDRESS: 26777 HALSTED ROAD CITY/ST/ZIP/CO: FARMINGTON HILLS, MI 48331-3586	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ SUSAN GAILEY VINCENT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SUSAN GAILEY VINCENT, SECRETARY PRINTED NAME AND CORPORATE TITLE
	11/7/2011 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	