

1.) CORPORATION NAME:

Laurier Indemnity Company

DUE DATE: **1/31/2012**

SCC ID NO: **F1239500**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

C T CORPORATION SYSTEM

4701 COX ROAD, SUITE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,420,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

IA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10805 OLD MILL ROAD

CITY/ST/ZIP: OMAHA, NE 68154-

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.

NAME: STEVEN MENZIES
TITLE: PRESIDENT
ADDRESS: PO BOX 3646
CITY/ST/ZIP/CO: OMAHA, NE 68103-0646

OFFICER

DIRECTOR

NAME: JEFFREY SILVER
TITLE: SECRETARY
ADDRESS: PO BOX 3646
CITY/ST/ZIP/CO: OMAHA, NE 68103-0646

OFFICER

DIRECTOR

NAME: SIDNEY FERENC
TITLE: DIRECTOR
ADDRESS: PO BOX 3646
CITY/ST/ZIP/CO: OMAHA, NE 68103-0646

OFFICER

DIRECTOR

NAME: STEVEN MENZIES
TITLE: TREASURER
ADDRESS: PO BOX 3646
CITY/ST/ZIP/CO: OMAHA, NE 68103-0646

OFFICER

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/ STEVEN MENZIES

STEVEN MENZIES, PRESIDENT

1/9/2012

SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

PRINTED NAME AND CORPORATE
TITLE

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.