

1.) CORPORATION NAME:

DUE DATE: **9/30/2013**

**Western Agricultural Insurance Company**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1393943**

**RICHARD MATTOX JR  
12580 WEST CREEK PKWY  
RICHMOND, VA**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 3,000,000  |
| OTH    | 100,000    |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  
**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:  
**IA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5400 UNIVERSITY AVENUE

CITY/ST/ZIP: WEST DES MOINES, IA 50266

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.

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|---|---|--|
| NAME: DENNIS JOHN PRESNALL<br>TITLE: SR VP/ SEC<br>ADDRESS: 5400 UNIVERSITY AVENUE<br>CITY/ST/ZIP/CO: WEST DES MOINES, IA 50266 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| NAME: JAMES P BRANNEN<br>TITLE: CEO<br>ADDRESS: 5400 UNIVERSITY AVENUE<br>CITY/ST/ZIP/CO: WEST DES MOINES, IA 50266             | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| NAME: STEVEN LEE BACCUS<br>TITLE: CHAIRMAN<br>ADDRESS: 2627 KFB PLAZA<br>CITY/ST/ZIP/CO: MANHATTAN, KS 66503                    | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: KEVIN G ROGERS<br>TITLE: VICE CHAIRMAN<br>ADDRESS: 325 SOUTH HIGLEY RD<br>CITY/ST/ZIP/CO: GILBERT, AZ 85296               | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: RICHARD W FELTS<br>TITLE: DIRECTOR<br>ADDRESS: 3453 COUNTY ORAD 4700<br>CITY/ST/ZIP/CO: LIBERTY, KS 67351                 | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: JEFF A GROSSENBACHER<br>TITLE: DIRECTOR<br>ADDRESS: 1943 224TH ROAD<br>CITY/ST/ZIP/CO: BERN, KS 66408                     | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |

|  |   |                   |
|--|---|-------------------|
| NAME: JOE HEINRICH<br>TITLE: DIRECTOR<br>ADDRESS: 15125 69TH ST<br>CITY/ST/ZIP/CO: MAQUOKETA, IA 52060   | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |                   |
| NAME: CRAIG D HILL<br>TITLE: DIRECTOR<br>ADDRESS: 5400 UNIVERSITY AVE<br>CITY/ST/ZIP/CO: WEST DES MOINES, IA 50266   | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |                   |
| NAME: LELAND J HOGAN<br>TITLE: DIRECTOR<br>ADDRESS: P O BOX 41<br>CITY/ST/ZIP/CO: 1443 S HOGAN ROAD<br>SOUTH RIM, UT 84071   | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |                   |
| NAME: STEVE D NELSON<br>TITLE: DIRECTOR<br>ADDRESS: 5225 SOUTH 16TH STREET<br>P O BOX 50299<br>CITY/ST/ZIP/CO: LINCOLN, NE 68512   | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |                   |
| NAME: CHARLES E NORRIS<br>TITLE: DIRECTOR<br>ADDRESS: 10753 285TH STREET<br>CITY/ST/ZIP/CO: MASON CITY, IA 50401-9115  | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |                   |
| NAME: KEVIN D PAAP<br>TITLE: DIRECTOR<br>ADDRESS: 15145 510TH AVENUE<br>CITY/ST/ZIP/CO: GARDEN CITY, MN 56034-9643   | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |                   |
| NAME: SCOTT E VANDERWAL<br>TITLE: DIRECTOR<br>ADDRESS: 730 N SAMARA AVENUE<br>CITY/ST/ZIP/CO: VOLGA, ND 57071  | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |                   |
| NAME: MICHAEL S WHITE<br>TITLE: DIRECTOR<br>ADDRESS: BOX 580<br>CITY/ST/ZIP/CO: DEXTER, NM 88230   | <input type="checkbox"/> OFFICER <input checked="" 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/ DENNIS JOHN PRESNALL<br>SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT  | DENNIS JOHN PRESNALL, SR VP/<br>SEC<br>PRINTED NAME AND CORPORATE TITLE       | 9/18/2013<br>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. |   |                   |