

1.) CORPORATION NAME:

Mendakota Insurance Company

DUE DATE: **8/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1558883**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2805 DODD ROAD
SUITE 300

CITY/ST/ZIP: EAGAN, MN 55121

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:	WILLIAM AUGUST HICKEY JR.	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/DIR		
ADDRESS:	150 PIERCE ROAD 6TH FLOOR ITASCA, IL 60143		
CITY/ST/ZIP/CO:			
NAME:	ANNETTE FRANCES SCHNIDT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2805 DODD ROAD SUITE 300 EAGAN, MN 55121		
CITY/ST/ZIP/CO:			
NAME:	RICHARD ARNOLD SLATER, JR.	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	150 PIERCE ROAD 6TH FLOOR ITASCA, IL 60143		
CITY/ST/ZIP/CO:			
NAME:	SANDRA MARIE PAPPAS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	2805 DODD RD SUITE 300 EAGAN, MN 55121-1519		
CITY/ST/ZIP/CO:			
NAME:	DOROTHY ANN BROOKS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	150 PIERCE ROAD 6TH FLOOR ITASCA, IL 60143		
CITY/ST/ZIP/CO:			

NAME: LEEANN HAZEL REPTA TITLE: DIRECTOR ADDRESS: 150 PIERCE ROAD CITY/ST/ZIP/CO: 6TH FLOOR ITASCA, IL 60143	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: ROBERT THOMAS ROTONDO TITLE: DIRECTOR ADDRESS: 150 PIERCE ROAD CITY/ST/ZIP/CO: 6TH FLOOR ITASCA, IL 60143	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ DOROTHY ANN BROOKS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DOROTHY ANN BROOKS, SECRETARY PRINTED NAME AND CORPORATE TITLE	7/2/2014 DATE
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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.