## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000002488

GROVES, MARTIN

IRVING, TX 75063

4929 WEST ROYAL LANE - 2ND FLOOR

Name:

Address:

City-St-Zip:

Entity Name: INDEPENDENT PRODUCERS OF AMERICA AGENCY, INC.

FILED Feb 27, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
4929 WES SECOND I IRVING, TX		E				
Current Mailing Address:			New Mailing Address:			
4929 WES SECOND I IRVING, TX		E				
FEI Number: 20-8432057		FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and	Address of Ne	w Registered Agent:	
11380 PR		NS NETWORK, INC. RMS ROAD #221E S, FL 33410 US				
	named entity e e of Florida.	submits this statement for the	purpose of changing i	ts registered offi	ce or registered agent, or bo	oth,
SIGNATUR	RE:					
	Electror	ic Signature of Registered Ag	ent		Date	_
Election Car	npaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	NAUERT, PETE	DYAL LANE - 2ND FLOOR	Title: Name: Address: City-St-Zip:	( ) (	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PERTILE, RICH	DYAL LANE - 2ND FLOOR	Title: Name: Address: City-St-Zip:	()(	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	STUART, IAN	Delete DYAL LANE - 2ND FLOOR 063	Title: Name: Address: City-St-Zip:	STUART, IAN	Change () Addition FAL LANE - 2ND FLOOR 33	
Title: Name: Address: City-St-Zip:	OWENS, MICH	DYAL LANE - 2ND FLOOR	Title: Name: Address: City-St-Zip:	OWENS, MICHAE	AL LANE - 2ND FLOOR	
Title:	S (	Delete	Title:	( ) (	Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: RICK PERTILE P 02/27/2008