2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

PRINTED

F SIGNING OFFICER OR DIRECTOR

May 02, 2006 8:00 am Secretary of State DOCUMENT # F95000005595 05-02-2006 90166 019 ***150.00 SOUTHWEST INSURANCE AGENCY, INC. Principal Place of Business Mailing Address 1201 ELM STREET 1201 ELM ST **SUITE 3500 SUITE 3500** DALLAS, TX 75270 DALLAS, TX 75270 211 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04242006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 75-1653811 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be П After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. VΡ TITLE ☐ Delete TITLE Change 2 ☐ Addition WOOLDRIDGE, REBECCA A NAME NAME MEYERS, MIKE STREET ADDRESS 1201 ELM ST., STE. 3500 STREET ADDRESS 1201 ELM ST., STE. 3500 CITY - ST-ZIP DALLAS, TX 75270 CITY-ST-7IP DALLAS, TX 75270 Z-Delete TITLE TITLE Addition ☐ Change NAME SCHMITT, LARRY M NAME STREET ADDRESS 1201 ELM ST STE 3500 STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75270 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TUBB, ALLEN R NAME MAME STREET ADDRESS 1201 ELM ST. STE. 3500 STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75270 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Change Addition MEYERS, MIKE NAME MAME STREET ADDRESS 1201 ELM ST. STE. 3500 STREET ADDRESS CITY-ST-ZIP **DALLAS, TX 75270** CITY-ST-ZIP **VCFO** Delete TITLE TIT) F ☐ Change ■ Addition NAME HODGES, STACY M. NAME STREET ADDRESS 1201 ELM STREET, SUITE 3500 STREET ADDRESS **DALLAS, TX 75270** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 of the corporation of the corporation of the c

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214-859-1800

Daytime Phone #

4-25-06