

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91062 002 ***150.00

DOCUMENT # F97000001354



1. Entity Name
VALIC RETIREMENT SERVICES COMPANY

Principal Place of Business
**2929 ALLEN PKWY.
HOUSTON TX 77019**

Mailing Address
**2929 ALLEN PKWY.
HOUSTON TX 77019**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country Zip Country

4. FEI Number **76-0519990** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

Name
... CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable)
1201 HAYS STREET

City **TALLAHASSEE** **FL** Zip Code **32301**

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 *Maria S. Replogle*

**Maria S. Replogle
as its agent**

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	SVPS	<input type="checkbox"/> Delete
NAME	CAVANAUGH, MARY L	
STREET ADDRESS	2929 ALLEN PKWY	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	EVPD	<input checked="" type="checkbox"/> Delete
NAME	ABRAMS, BRUCE R	
STREET ADDRESS	2929 ALLEN PKWY.	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	GRAF, JOHN A	
STREET ADDRESS	2929 ALLEN PKWY	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	EVPD	<input type="checkbox"/> Delete
NAME	CONDON, ROBERT P	
STREET ADDRESS	2929 ALLEN PKWY.	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	AT	<input type="checkbox"/> Delete
NAME	ROCK, TARA S	
STREET ADDRESS	2929 ALLEN PKWY.	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	ATOF	<input type="checkbox"/> Delete
NAME	CRICKS, DANIEL R	
STREET ADDRESS	2929 ALLEN PKWY.	
CITY-ST-ZIP	HOUSTON TX 77019	

TITLE	EVPS/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	EVPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	M. KATHLEEN ADAMSON	
STREET ADDRESS	2929 ALLEN PARKWAY	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	SVPA	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MICHAEL J. AKERS	
STREET ADDRESS	2929 ALLEN PARKWAY	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Daniel R. Cricks* **DANIEL R. CRICKS, TAX OFFICER 713-831-4356 04/11/2003.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)