File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. SETT OF THE OWNER FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY **Katherine Harris** ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 98 MAY 21 AM H: 40 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 188.75 Name and Mailing Address of Limited Liability Company **DOCUMENT # M94000000088** 1a. Principal Place of Business Address INDEPENDENT PREMIUM FINANCE COMPANY LLC 5944 LUTHER LANE, SUITE 309 5944 LUTHER LANE, SUITE 309 DALLAS TX 75225 DALLAS TX 75225 3. Date Organized or Qualified 3a. State of Formation 2a. Mailing Address 2 Principal Place of Business 09/02/1994 DESuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 75-2545230 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Ζıp Country \$8.75 Additional Fee Required 07/27/1998 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office CORPORATION INFORMATION SERVICES, INC 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) 600002887566--8 TALLAHASSEE FL 32301 -05/26/99 -- 010<del>94---008</del> Suite, Apt. #, etc. \*\*\*\*188.79 \*\*\*\*188.75 Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or redistired agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE Med Agent Accepting Appointment) (NOTE, Registered Agent signalure required when revisiting) City, State and Zip Code **Business Street Address** 10. Title 10210 N. CENTRAL EXPRESSWA DALLAS TX GOSS, RANDALL G MGRM 5944 LUTHER LANE, STE 309 ALLAS TX MGRM BAILEY, ROY W MGRM PREMIUM FINANCE HOLDIN 5944 LUTHER LANE, STE 309 DALLAS TX 11 I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee etmosphered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address

SIGNATURE: