2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2017
Secretary of State
CC7606671828

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Entity Name: LPA INSURANCE AGENCY, INC.

Current Principal Place of Business:

4030 TRUXEL ROAD
SUITE B
SACRAMENTO, CA 95834

Current Mailing Address:

4030 TRUXEL ROAD
SUITE B
SACRAMENTO, CA 95834 US

FEI Number: 68-0417308

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PARK DR STE A
TALLAHASSEE, FL 32301 US

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.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D	Title	D
Name	BROWN, TIMOTHY L	Name	BANCO, JOSEPH
Address	4030 TRUXEL ROAD SUITE B	Address	1251 WATERFRONT PLACE, SUITE 510
City-State-Zip:	SACRAMENTO CA 95834	City-State-Zip:	PITTSBURGH PA 15222
Title	P	Title	VP
Name	BROWN, TIMOTHY L	Name	FONG, SARAH F
Address	4030 TRUXEL ROAD SUITE B	Address	4030 TRUXEL ROAD SUITE B
City-State-Zip:	SACRAMENTO CA 95834	City-State-Zip:	SACRAMENTO CA 95834
Title	CFO	Title	D
Name	BANCO, JOSEPH	Name	DOWNS, DAVID
Address	1251 WATERFRONT PLACE, SUITE 510	Address	1251 WATERFRONT PLACE, SUITE 510
City-State-Zip:	PITTSBURGH PA 15222	City-State-Zip:	PITTSBURGH PA 15222

I hereby 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 all other like empowered.

SIGNATURE: TIMOTHY L. BROWN PRESIDENT 02/10/2017

Electronic Signature of Signing Officer/Director Detail — Date