

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000429

Entity Name: COMBINED GROUP INSURANCE SERVICES, INC.**Current Principal Place of Business:**14785 PRESTON ROAD
SUITE 350
DALLAS, TX 75254-7876**Current Mailing Address:**14785 PRESTON ROAD
SUITE 350
DALLAS, TX 75254-7876 US**FEI Number:** 26-0681247**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PRESIDENT
Name	STOCK, BLAKE Y.
Address	14785 PRESTON ROAD SUITE 350
City-State-Zip:	DALLAS TX 75254

Title	SECRETARY
Name	LLOYD, ROBERT W.
Address	220 S. RIDGEWOOD AVENUE
City-State-Zip:	DAYTONA BEACH FL 32114

Title	TREASURER
Name	STANTON, JOSEPH
Address	1815 GRIFFIN RD, SUITE 300
City-State-Zip:	FT LAUDERDALE FL 33004

Title	VICE PRESIDENT & ASSISTANT SECRETARY
Name	ROBINSON, ANTHONY
Address	220 S. RIDGEWOOD AVE.
City-State-Zip:	DAYTONA BEACH FL 32114

Title	DIRECTOR
Name	STRIANESE, ANTHONY T.
Address	303 CORPORATE CENTER DRIVE, SUITE 300
City-State-Zip:	STOCKBRIDGE GA 30281

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: ANTHONY ROBINSONVICE PRESIDENT &
ASSISTANT SECRETARY

04/11/2015

Electronic Signature of Signing Officer/Director Detail_____
Date