

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000001319

**Entity Name:** AIM ASSOCIATION INSURANCE MANAGEMENT, INC.

**Current Principal Place of Business:**

8144 WALNUT HILL LANE,  
# 900  
DALLAS, TX 75231

**Current Mailing Address:**

8144 WALNUT HILL LANE,  
# 900  
DALLAS, TX 75231 US

**FEI Number:** 75-2765890

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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 SECRETARY, TREASURER,  
DIRECTOR  
Name ALLEN, ELGIN B JR.  
Address 8144 WALNUT HILL LANE,  
# 900  
City-State-Zip: DALLAS TX 75231

Title PRESIDENT  
Name FAGAN, JAMIE  
Address 8144 WALNUT HILL LANE,  
# 900  
City-State-Zip: DALLAS TX 75231

*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:** ALLEN , ELGIN B, JR.

**SECRETARY**

**04/05/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date