

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Moynihan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 818191

(9)

To: Corporation Name:

LOMAS INSURANCE SERVICES, INC.

**APPROVED
AND
FILED**

05 MAY -1 PM 2:20

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business:

**1600 VICEROY DR., 4TH FLOOR
ATTN: ROOFNER, BOB
DALLAS TX 75235
US**

Mailing Address:

**1600 VICEROY DR. 4TH FL
ATTN: ROOFNER, BOB
DALLAS TX 75235
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:		2a. Mailing Address:		3. Date Incorporated or Created:		3a. Date of Last Report:	
21		2a		09/24/1964		05/01/1994	
22		2b		4. FEI Number:		Applied For	
23		2c		06-0431730		Not Applicable	
24		2d		5. Certificate of Status Desired:		8.75 Additional Fee Required	
25		2e		6. Election Campaign Financing Trust Fund Contribution:		5.00 May Be Added to Fees	
26		2f		7. This corporation has liability for intangible tax under S. 199.032 Florida Statutes:		Yes No	
27		2g		8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes:		Yes No	
28		2h		9. Name and Address of Current Registered Agent:		10. Name and Address of New Registered Agent:	
29		2i		81		82	
30		31		83		84	
32		33		85		86	

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name:

82 Street Address (P.O. Box Number is Not Acceptable):

83

84 City:

FL

85

86 Zip Code:

11. Pursuant to the provisions of Sections 607.03(2) and 607.03(3) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, as both in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and understand the implications of this change. (S. 607.03(4) Florida Statutes)

SIGNATURE:

Signature of the person authorized to execute this statement.

Signature of the person authorized to execute this statement.

Signature

12. OFFICERS AND DIRECTORS:		13. ADDITIONS CHANGED TO OFFICERS AND DIRECTORS:	
NAME	EVP HARRIS, NED 1600 VICEROY DALLAS, TX 00000	NAME	CHAIRMAN, CEO ERIC MOOTH 1600 VICEROY DALLAS, TEXAS 75235
NAME	SD CROWSON, JAMES L. 1600 VICEROY DALLAS, TX 00000	NAME	
NAME	D WHITE, GARY 1600 VICEROY DALLAS, TX 00000	NAME	
NAME	SVP ROOFNER, M.J. 1600 VICEROY DALLAS, TX 00000	NAME	VICE PRESIDENT STEVEN SCARBROUGH 1600 VICEROY DALLAS, TEXAS 75235
NAME	T BYERLEY, ROBERT E. JR. 1600 VICEROY DALLAS TX	NAME	TREASURER ROBERT DENTON 1600 VICEROY DALLAS, TEXAS 75235
NAME	VP BARNES, JANET 1600 VICEROY DALLAS, TX 00000	NAME	

14. I, the undersigned, certify that the information submitted with this filing is voluntarily furnished and is true and correct, and that the corporation is organized in accordance with the laws of the State of Florida. I further certify that the information was obtained from the annual report or supplementary annual report as true and correct and that my signature shall have the same legal effect as if it were made by the person or persons in whose name the corporation or the person or persons empowered to execute this report are reported by Chapter 607 Florida Statutes, and that my name appears on Block 13 of this filing.

SIGNATURE: *Steven Scarbrough* STEVEN SCARBROUGH 4/27/95 214-879-7022

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR