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May 16 1997 8:00am
Secretary of State

**PROFIT
CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # 818191 (9)

1. Corporation Name
LOMAS INSURANCE SERVICES, INC.



Principal Place of Business

**1800 VICEROY DR., 4TH FLOOR
ATTN: ROOFNER, BOB
DALLAS TX 75235
US**

Mailing Address

**1800 VICEROY DR., 4TH FL
ATTN: ROOFNER, BOB
DALLAS TX 75235-2308
US**

3. Date Incorporated or Qualified

09/24/1964

3a. Date of Last Report

05/01/1996

4. FEI Number

06-0431730

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

717 N. Harwood

Suite, Apt. #, etc.

Suite 1800

City & State

Dallas, TX

Zip

75201

Country

Dallas

2a. Mailing Address

717 N. Harwood

Suite, Apt. #, etc.

Suite 1800

City & State

Dallas, TX

Zip

75201

Country

Dallas

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **CCEO** ☐ DELETE

NAME **BOOTH, ERIC**
STREET ADDRESS **1800 VICEROY**
CITY-ST-ZIP **DALLAS, TX 00000**

TITLE **S** ☐ DELETE

NAME **GREGORY, LUIS P**
STREET ADDRESS **1800 VICEROY**
CITY-ST-ZIP **DALLAS TX**

TITLE **D** ☐ DELETE

NAME **WHITE, GARY**
STREET ADDRESS **1800 VICEROY**
CITY-ST-ZIP **DALLAS, TX 00000**

TITLE **VP** ☒ DELETE

NAME **SCARBROUGH, STEVEN**
STREET ADDRESS **1800 VICEROY**
CITY-ST-ZIP **DALLAS, TX 00000**

TITLE **T** ☒ DELETE

NAME **DENTON, ROBERT**
STREET ADDRESS **1800 VICEROY**
CITY-ST-ZIP **DALLAS TX**

TITLE **VP** ☒ DELETE

NAME **BARNES, JANET**
STREET ADDRESS **1800 VICEROY**
CITY-ST-ZIP **DALLAS, TX 00000**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **CEO & Director** ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS **717 N. Harwood, Suite 1800**
1.4 CITY-ST-ZIP **75201**

2.1 TITLE **SVP & Secy.** ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS **717 N. Harwood, Suite 1800**
2.4 CITY-ST-ZIP **75201**

3.1 TITLE **SVP & Controller & Director** ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS **717 N. Harwood, Suite 1800**
3.4 CITY-ST-ZIP **75201**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

GARY WHITE

3/25/97

06240665-6302

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)