

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **826248** (7)

1. Corporation Name
J.C. PENNEY INSURANCE COMPANY



Principal Place of Business: 2700 WEST PLANO PKWY, PLANO TX 75075, US
 Mailing Address: 2700 WEST PLANO PKWY, PLANO TX 75075, US

2. Principal Place of Business
 21 2700 W. Plano Parkway, Suite, Apt. #, etc.
 22 City & State: Plano, TX 75075
 23 City & State: Plano, TX 75075
 24 Zip: Country: 25 US

2a. Mailing Address
 26 State, Apt. #, etc.
 27 City & State
 28 Zip: Country: 29 US

3. Date Incorporated or Qualified: 05/26/1971
 3a. Date of Last Report: 03/01/1995
 4. FEI Number: 74-2648800
 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

9. Name and Address of Current Registered Agent

THE INSURANCE COMMISSIONER
 CAPITOL BUILDING
 TALLAHASSEE FL 32304

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City: 85 Zip Code: FL

11. Pursuant to the provisions of Sections 607.0592 and 607.1505, 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 of Registered Agent: _____ Date: _____

12. OFFICERS AND DIRECTORS

11.1 TITLE	D	<input type="checkbox"/> DELETE
11.2 NAME	SPURLOCK, TED L	
11.3 STREET ADDRESS	5719 TIMBERBENT DRIVE	
11.4 CITY, ST, ZIP	DALLAS TX 75252	
11.5 TITLE	PD	<input type="checkbox"/> DELETE
11.6 NAME	WILLIAMS, FRED A	
11.7 STREET ADDRESS	6515 WESTGATE DR	
11.8 CITY, ST, ZIP	DALLAS TX	
11.9 TITLE	VS	<input type="checkbox"/> DELETE
11.10 NAME	NABOURS, LARRY A.	
11.11 STREET ADDRESS	3120 OAK GROVE DR	
11.12 CITY, ST, ZIP	PLANO TX	
11.13 TITLE	D	<input type="checkbox"/> DELETE
11.14 NAME	NORTHAM, ROBERT E	
11.15 STREET ADDRESS	5808 BRIDLE BEND TRAIL	
11.16 CITY, ST, ZIP	PLANO TX 75075	
11.17 TITLE	VT	<input type="checkbox"/> DELETE
11.18 NAME	FESPERMEN, JOHN E	
11.19 STREET ADDRESS	6525 DARTBROOK DRIVE	
11.20 CITY, ST, ZIP	DALLAS TX 75240	
11.21 TITLE	D	<input type="checkbox"/> DELETE
11.22 NAME	LOTTER, CHARLES R	
11.23 STREET ADDRESS	5819 FALLSVIEW LANE	
11.24 CITY, ST, ZIP	DALLAS TX 75252	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME		
13.3 STREET ADDRESS	6501 Legacy Drive	
13.4 CITY, ST, ZIP	Plano, TX 75024-0007	
13.5 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME		
13.7 STREET ADDRESS	2700 W. Plano Parkway	
13.8 CITY, ST, ZIP	Plano, TX 75075	
13.9 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME		
13.11 STREET ADDRESS	2700 W. Plano Parkway	
13.12 CITY, ST, ZIP	Plano, TX 75075	
13.13 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME		
13.15 STREET ADDRESS	6501 Legacy Drive	
13.16 CITY, ST, ZIP	Plano, TX 75024-0007	
13.17 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.18 NAME		
13.19 STREET ADDRESS	2700 W. Plano Parkway	
13.20 CITY, ST, ZIP	Plano, TX 75075	
13.21 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.22 NAME		
13.23 STREET ADDRESS	6501 Legacy Drive	
13.24 CITY, ST, ZIP	Plano, TX 75024-0007	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 a duly authorized 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 from an appointed agent to an address.

SIGNATURE: *Larry A. Nabours* (Larry A. Nabours) 1/19/96 214-891-2500
 SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)