

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002663

FILED
Feb 22, 2007
Secretary of State

Entity Name: JMG/IC INSURANCE AGENCY, INC.

Current Principal Place of Business:

3310 N UNIVERSITY DR
NACODOCHES, TX 75965

New Principal Place of Business:

3310 N UNIVERSITY DR
NACOGDOCHES, TX 75965

Current Mailing Address:

3310 N UNIVERSITY DR
NACODOCHES, TX 75965

New Mailing Address:

3310 N UNIVERSITY DR
NACOGDOCHES, TX 75965

FEI Number: 76-0057068

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BISHOP, CHARLES R
Address: 3310 N UNIVERSITY DR
City-St-Zip: NACODOCHES, TX 75965

Title: PS () Delete
Name: LAFOUR, GARY L
Address: 3310 N UNIVERSITY DR
City-St-Zip: NACODOCHES, TX 75965

Title: SVP () Delete
Name: THOMPSON, JACK M JR
Address: 3310 N UNIVERSITY DR
City-St-Zip: NACODOCHES, TX 75965

Title: VP () Delete
Name: MACWILLIAM, JAMES
Address: 3310 N UNIVERSITY DR
City-St-Zip: NACODOCHES, TX 75965

Title: COB () Delete
Name: GREEN, JOE MAX
Address: 3310 N UNIVERSITY DR
City-St-Zip: NACODOCHES, TX 75965

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SVP () Change (X) Addition
Name: BAYCROFT, WILLIAM T
Address: 3310 N UNIVERSITY DR
City-St-Zip: NACOGDOCHES, TX 75965

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOE MAX GREEN

COB

02/22/2007

Electronic Signature of Signing Officer or Director

Date