2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Feb 01, 2007 8:00 am Secretary of State **ECCUMENT # F05000004678** 02-01-2007 90031 037 ***158.75 A I M INSURANCE AGENCY INC. (DE) Mailing Address Principal Place of Business 11 GREENWAY PLAZA, SUITE 100 11 GREENWAY PLAZA, SUITE 100 40008288 ATTN: TABITHA WASHINGTON ATTN: TABITHA WASHINGTON HOUSTON, TX 77046 HOUSTON, TX 77046 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 01192007 Chg-P CR2E034 (12/06) 4. FEI Number City & State Applied For City & State 76-0457666 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!!. FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD Delete TITLE TITLE ☐ Change Addition NEEDLES, GENE L NAME NAME STREET ADDRESS 11 GREENWAY PLAZA, SUITE 100 STREET ADDRESS CITY-ST-ZIP HOUSTON, TX 77046 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME GIBSON, KRISTA D NAME 11 GREENWAY PLAZA, SUITE 100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOUSTON, TX 77046 CITY-ST-ZIP Annute Lege - Treasure TITLE TITLE Addition HAWLEY, DAWN M NAME MAME 11 Grunwith Plaza, Suite 100 STREET ADDRESS 11 GREENWAY PLAZA, SUITE 100 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOUSTON, TX 77046 💢 Delete TITLE X Addition naminan Chairman WILLIAMSON, MARK H NAME NAME Philip A. Toula STREET ADDRESS STREET ADDRESS 11 GREENWAY PLAZA, SUITE 100 11 Grunway Prozo, Suit 100 CITY-ST-ZIP HOUSTON, TX 77046 CITY-ST-ZIP TITLE Assistant : ☐ Addition TITLE Change \mathcal{D} COPPEDGE, JIM A NAME sim coppedge NAME)bqa+r 4703 BRAYTON TERRACE S STREET ADDRESS pspR Haunurd STREET ADDRESS Suite 100 Hddiis CITY-ST-ZIP PALM HARBOR, FL 34685 CITY-ST-ZIP TITLE Delete TITLE MOHING HOOKIESE Addition PFLUEGER, KATHLEEN D NAME Peter Davidson on Hick, asal 9 yearnsmall STREET ADDRESS 11 GREENWAY PLAZA, SUITE 100 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOUSTON, TX 77046 JUPPY XT. 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if

FILED