2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005523

Entity Name: INSURANCE PRODUCERS OF AMERICA AGENCY, INC.

FILED Jul 09, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
777 MAIN ST., SUITE 3100 FORT WORTH, TX 76102				4929 WEST ROYAL LANE SECOND FLOOR IRVING, TX 75063		
Current Mailing Address:				New Mailing Address:		
777 MAIN ST., SUITE 3100 FORT WORTH, TX 76102				4929 WEST ROYAL LANE SECOND FLOOR IRVING, TX 75063		
FEI Number:	20-3537019	FEI Number Applied For ()	FEI Num	ber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name					Address of N	New Registered Agent:
CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD, #221E PALM BEACH GARDENS, FL 33410 US						
The above in the State		submits this statement for the pur	rpose of	changing it	s registered o	office or registered agent, or both,
SIGNATUR	E:					
Electronic Signature of Registered Agent						Date
		3(2)(b), F.S., the corporation did not r	eceive th	ne prior notice).	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title:	NAUERT, PETE 777 MAIN ST., \$ FORT WORTH, PS () OWENS, MICH 777 MAIN ST., \$ FORT WORTH, T () FISCHER, CAR 777 MAIN ST., \$ FORT WORTH,	SUITE 3100 TX 76102 Delete AEL SUITE 3100 TX 76102 Delete L SUITE 3100		Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title:	NAUERT, PETE 4929 WEST RO IRVING, TX 75 VP (X OWENS, MICH 4929 WEST RO IRVING, TX 75 P (X PERTILE, RICH 4929 WEST RO IRVING, TX 75	DYAL LANE 1063 C) Change () Addition IAEL DYAL LANE 1063 C) Change () Addition C DYAL LANE
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:		Delete		Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	STUART, IAN 4929 WEST RO IRVING, TX 75	DYAL LANE 6063) Change (X) Addition (DYAL LANE

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL OWENS VP 07/09/2007