

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000313

FILED
Jun 13, 2011
Secretary of State

Entity Name: DUNCAN FRASER & BRIDGES INSURANCE AGENCY, INC.

Current Principal Place of Business:

117 E. KINGSMILL
PAMPA, TX 79065

New Principal Place of Business:

Current Mailing Address:

117 E. KINGSMILL
PAMPA, TX 79065

New Mailing Address:

FEI Number: 75-2568573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: P
Name: FRASER, DONALD L
Address: 102 W. 18TH ST.
City-St-Zip: PAMPA, TX 79065

Title: EV
Name: BRIDGES, BILLY F
Address: 505 N. GRAY
City-St-Zip: PAMPA, TX 79065

Title: V
Name: FRASER, MICHAEL L
Address: 7722 BENT TREE
City-St-Zip: AMARILLO, TX 79109

Title: V
Name: DUNCAN, EWERT R
Address: 2110 CHARLES ST.
City-St-Zip: PAMPA, TX 79065

Title: V
Name: DUNCAN, BRIAN G
Address: 2332 EVERGREEN
City-St-Zip: PAMPA, TX 79065

Title: V
Name: WOODINGTON, GAIL
Address: 2512 FIR
City-St-Zip: PAMPA, TX 79065

I hereby 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 all other like empowered.

SIGNATURE: BILLY F. BRIDGES

EV

06/13/2011

Electronic Signature of Signing Officer or Director

Date