2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2012
Secretary of State

DOCUMENT# F11000001249

Entity Name: ONEMAIN ASSURANCE SERVICES, INC.

Current Principal Place of Business:

3001 MEACHAM BLVD., SUITE 100
FORT WORTH, TX 76137

New Principal Place of Business:

Current Mailing Address:

3001 MEACHAM BLVD., SUITE 100
FORT WORTH, TX 76137

New Mailing Address:

FEI Number: 27-5132462 **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

OFFICERS AND DIRECTORS:

Title:	PCHR
Name:	CARSON, DAVA S
Address:	3001 MEACHAM BLVD., SUITE 100
City-St-Zip:	FORT WORTH, TX 76137

Title:	SD
Name:	LEHMAN, GREGG H
Address:	3001 MEACHAM BLVD., SUITE 100
City-St-Zip:	FORT WORTH, TX 76137

Title:	T
Name:	LARKIN, PAULA D
Address:	3001 MEACHAM BLVD., SUITE 100
City-St-Zip:	FORT WORTH, TX 76137

Title:	D
Name:	MCCORMICK, C. SUE
Address:	3001 MEACHAM BLVD., SUITE 100
City-St-Zip:	FORT WORTH, TX 76137

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: GREGG H. LEHMAN SD 01/09/2012

Electronic Signature of Signing Officer or Director Date