2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2004
Secretary of State

DOCUMENT# F93000003570

Entity Name: DALLAS FIRE INSURANCE COMPANY

Current Principal Place of Business:

14160 DALLAS PARKWAY, #500
DALLAS, TX 75254 US

New Principal Place of Business:

Current Mailing Address:

14160 DALLAS PARKWAY, #500
DALLAS, TX 75254 US

New Mailing Address:

FEI Number: 75-2263978 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	COB	( ) Delete
Name:	WOOD, CHARLES DAVID JR.	
Address:	5518 WINSTON COURT	
City-St-Zip:	DALLAS, TX 75220	
Title:	P	( ) Delete
Name:	EISENMANN, EUGENE JOSEPH JR.	
Address:	111 ST. ANDREWS	
City-St-Zip:	MABANK, TX 75156	
Title:	T	( ) Delete
Name:	HAGAN, JOHN WILLIAM	
Address:	806 KING LEONARD	
City-St-Zip:	SCROGGINS, TX 75480	
Title:	D	( ) Delete
Name:	REID, WILLIAM	
Address:	5149 BRANDYWINE LANE	
City-St-Zip:	FRISCO ON, TX 75034	
Title:	D	( ) Delete
Name:	HANSON, GAY LYNN	
Address:	2124 CRESTWOOD	
City-St-Zip:	DENTON, TX 76209	
Title:	D	( ) Delete
Name:	MEREDITH, KAREN	
Address:	1718 TIMBERS DR.	
City-St-Zip:	IRVING, TX 75061	

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CD WOOD, JR. COB 07/01/2004

Electronic Signature of Signing Officer or Director Date