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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 21 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000000264 (0)

INSURANCE ADVISORS OF AMERICA, INC.

Superior	Principal Place	of Business	Mailing Address		I IDDIIOD KAD IRIOI RIDA RÜNA DOIM BO	- - - - - - - - - - - - -
FORT WORTH TX 78107 FORT WORTH TX 78107-7255 3. Date incorporated or Qualified OJ/17/1985 3. Date industry OJ/17/1985 3. Date incorporated or Qualified OJ/17/1985 3. Date in Ducy 1886 4. FEI Number OJ/17/1985 Substance of Business Substance of	•		-			
2. Principal Place of Business 2a. Mailing Address 3c. Mailing		TX 76107		255		4
2. Principal Place of Business 2a. Mailing Address 3c. Mailing					Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Hace of Business 28. Maling Address 5. 5. 5. 5. 5. 5. 5.					the second secon	
Sufficiency of Status Desired Status	2. Principal Pla	ace of Business	2a. Mailing Address			Applied For
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The Plaquette of the Country State		, etc.				\$8.75 Additional
City & State City & State City & State City & State Trust Fund Contribution Added to Fees Additional City Country Zip	22		27		5. Certificate of Status Desired	Fee Required
Zip)	City & State		6. Election Campaign Financing	
25	23			4		
9, Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Size Address (P.O. Box Number is Not Acceptable) 87 Size Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 The provisions of Sections 607,0502 and 607 1508, Fiorial Statutes. 80 The provisions of Sections 607,0502 and 607 1508, Fiorial Statutes. 80 The provisions of Sections 607,0502 and 607 1508, Fiorial Statutes. 81 The provisions of Sections 607,0502 and 607 1508, Fiorial Statutes. 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Size Address (P.O. Box Number is Not Acceptable) 85 Size Address (P.O. Box Number is Not Acceptable) 86 Size Address (P.O. Box Number is Not Acceptable) 87 Size Address (P.O. Box Number is Not Acceptable) 88 Size Address (P.O. Box Number is Not Acceptable) 89 Size Address (P.O. Box Number is Not Acceptable) 80 Size Address (P.O. Box Number is Not Acceptable) 81 Size Address (P.O. Box Number is Not Acceptable) 82 Size Address (P.O. Box Number is Not Acceptable) 82 Size Address (P.O. Box Number is Not Acceptable) 83 Size Address (P.O. Box Number is Not Acceptable) 84 City Size Address (P.O. Box Number is Not Acceptable) 85 Size Address (P.O. Box Number is Not Acceptable) 86 City Size Address (P.O. Box Number is Not Acceptable) 87 Size Address (P.O. Box Number is Not Acceptable) 87 Size Address (P.O. Box Number is Not Acceptable) 88 Size Address (P.O. Box Number is Not Acceptable) 89 Size Address (P.O. Box Number is Not Acceptable) 80 Size Address (P.O. Box Number is Not Acceptable) 81 Size Address (P.O. Box Number is Not Acceptable) 82 Size Address (P.O. Box Number is Not Acceptable) 83 Size Address (P.O. Box Number is Not Acceptable) 84 City Size Address (P.O. Box Number is Not Acceptable) 8		<u> </u>	├ ── 1 `			
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 City FL 85 Zyp Code 11. Pursuant to the provisions of Socious 6D7 0502 and 607 1508. Florids Statutes. 84 City FL 85 Zyp Code 11. Pursuant to the provisions of Socious 6D7 0502 and 607 1508. Florids Statutes are registered agant or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registery agant it arm familiar with, and accept the obligations of. Socious 607 0505, Florids Statutes. SIGNATURE 12	24			30		
11. Pursuant to the provisions of Sections 607 0506 pand 607 1506. Fibride Statutes, the above-named corporation submits this statement for the purpositioner it arriber with, and a decept the obligations of Section 607 0506. Fibride Statutes. 11. Pursuant to the provisions of Sections 607 0506 pand 607 1506. Fibride Statutes, the above-named corporation submits this statement for the purposition of changing its register of logic or registered topins or both, in the State of Frontial Such change was authorized by the corporation's board of directors. Thereby accept the appointment as register and the purposition of the purposition o			nt Registered Agent	R1 Name	10, Name and Address of New N	agistolan wäalit
PLANTATION FL 33324 83 84 85 86 87 88 88 88 88 88 88 88 88				OT NAME		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTEL PCD NAME PCD MERRILL, ROBERT H 12. NAME SIRRET ADDRESS CITY-SI-2P FORT WORTH TX DELETE 11. TITLE VD GUNN, FRANK D SIRRET ADDRESS CITY-SI-2P FORT WORTH TX 12. NAME SIRRET ADDRESS CITY-SI-2P FORT WORTH TX 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. TITLE VD Change Add Add Add Add Add Add Add A				82 Street Ad	dress (P.O. Box Number is Not Accepte	ible)
THE PCD DELETE TO TRIED DELETE TO THE STD DELETE STD SERRET ADDRESS SOPH HULEN STORES	PLAN	NTATION FL 33324		83		
The Foreign to the provisions of Sections 607 0509 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its register of signal, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register of signal and accept the obligations of. Section 607 0505, Florida Statutes. SIGNATURE 12.					·	
11. Pursuant to the provisions of Soctions 607 C507 and 607 1508, Florida Statutes, the about-named corporation submits this statement for the purpose of changing its register of part of the children or registered agent and the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registery agent and married with, and accept the obligations of. Section 607 d505, Florida Statutes. SIGNATURE Signature byted or printed rame of registered agent and tife.4 appricable.				84 City		85 Zip Code
SIGNATURE Signature, typend or printed rate of registered agent and talk, if appricable.	44 5	10-1	On and CO7 1500 Florida Clatu	too the should named so	expension submits this statement for the	number of changing its registers.
SIGNATURE Signature, typend or printed rate of registered agent and talk, if appricable.	office or re	o the provisions or Sections 607.03 egistered agent, or both, in the Stat	e of Florida. Such change was	authorized by the corpor	ation's board of directors. I hereby according	ept the appointment as registered
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	agent. Lar	m familiar with, and accept the obli	gations of, Section 607.0505, FI	orida Statutes.		
12.	SIGNATURE .	Planet as the state of the stat	cont and title it applicable (NO)	F: Renistered Agent signature ren	uited when reinstation)	DATE .
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14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this angual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath	informatio	on indicated on this anyonal report o	r supplemental annual report is	true and accurate and th	nat my signature shall have the same le	gal effect as if made under oath; t
I am an officer or director of the colopiration or the received or trustee embowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it dhanged, or on an attachment with an address.	l lam an of	tticer or director of the colooration.	or the received or trustee embor	wared to execute this ret	out as required by Chapter 607, Florida	i otatoles, and that my hame