

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F9500007785**
1. Corporation Name
INSBROK, INC.

Principal Place of Business
**3830 N. 19th Avenue
PHOENIX, AZ 85015**

Mailing Address
**P.O. Box 65100
San Antonio, TX 78265**

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
3a. Date of Last Report
NEW

4. FEI Number
86-0772631

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
**CT Corporation System
1200 South Pine Island Rd.
Plantation, FL 33324**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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 registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	President/Director	☐ DELETE
NAME	Thomas Mangold	
STREET ADDRESS	901 Wilshire Dr. #1550	
CITY-ST-ZIP	Troy, MI 48007	
TITLE	Exec VP/Director	☐ DELETE
NAME	Mike Bodayle	
STREET ADDRESS	1020 NE Loop 410, #1700	
CITY-ST-ZIP	San Antonio, TX 78209	
TITLE	Treasurer	☐ DELETE
NAME	Mike Grandstaff	
STREET ADDRESS	901 Wilshire Dr. #1550	
CITY-ST-ZIP	Troy, MI 48007	
TITLE	Sr VP/Secretary/Director	☐ DELETE
NAME	Mark E. Watson III	
STREET ADDRESS	1020 NE Loop 410, #1700	
CITY-ST-ZIP	San Antonio, TX 78209	
TITLE	Chairman of the Board	☐ DELETE
NAME	Mark E. Watson, Jr.	
STREET ADDRESS	1020 NE Loop 410, #1700	
CITY-ST-ZIP	San Antonio, TX 78209	
TITLE	Randy Orth, VP	☐ DELETE
NAME	3830 N. 19th Ave.	
STREET ADDRESS	Phoenix, AZ 85015	
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	ASST. SECRETARY	☐ Change ☐ Addition
1.2 NAME	JILL Bumgardner	
1.3 STREET ADDRESS	1020 NE Loop 410, #700	
1.4 CITY-ST-ZIP	San Antonio, TX 78209	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jill Bumgardner

210-824-1546

Daytime Phone #

CR2E034 (12/95)