

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J65147 (7)

1. Corporation Name

FIRST INVESTORS LIFE AGENCY, INC.

Principal Place of Business

**980 N. FEDERAL HIGHWAY
SUITE 310
BOCA RATON FL 33432-2740**

Mailing Address

**980 N. FEDERAL HIGHWAY
SUITE 310
BOCA RATON FL 33432-2740**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/02/1987

3a. Date of Last Report

04/29/1994

4. FEI Number

59-2791070

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

9. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATE SECURITIES GRP INC
ATTENTION: GENERAL COUNSEL
980 N FEDERAL HIGHWAY #210
BOCA RATON FL 33432**

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	TVD
NAME	GLASER, GREGG S.
STREET ADDRESS	980 N FEDERAL HWY #210
CITY - ST - ZIP	BOCA RATON FL
TITLE	V
NAME	SIMONETTI, JOSEPH
STREET ADDRESS	980 N FEDERAL HWY 310
CITY - ST - ZIP	BOCA RATON FL
TITLE	CEO
NAME	LEEDS, MARSHALL T.
STREET ADDRESS	980 N. FEDERAL HWY. #310
CITY - ST - ZIP	BOCA RATON FL
TITLE	D
NAME	FERGUSON, WILLIAM D.
STREET ADDRESS	980 N. FEDERAL HWY #210
CITY - ST - ZIP	BOCA RATON FL
TITLE	D
NAME	MARKS, JOEL
STREET ADDRESS	1117 PERIMETER CENTER W. SUITE 500E
CITY - ST - ZIP	ATLANTA GA
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
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 110.07(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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gregg Glaser

4/19/95

407-338-2761