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

DOCUMENT # **P09331** **(0)**

1. Corporate Name
CTX INSURANCE AGENCY, INC.

Principal Place of Business
717 N. HARWOOD
LOCK BOX 8, 19 FLOOR ,MAX.ENERGY TWR
DALLAS TX 75201

Mailing Address
717 N. HARWOOD
LOCK BOX 8, 19 FLOOR ,MAX.ENERGY TWR.
DALLAS TX 75201

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/06/1986
3a. Date of Last Report: 04/08/1994

2. Principal Place of Business
21 9229 LBJ Freeway
Suite, Apt. #, etc.
22 Bldg 1, Ste 100
City & State
23 Dallas, TX
Zip
24 75243
County
25 Dallas

2a. Mailing Address
26 9229 LBJ Freeway
Suite, Apt. #, etc.
27 Bldg 1, Ste 100
City & State
28 Dallas, TX
Zip
29 75243
County
30 Dallas

4. FEI Number: 75-1425434 — 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

8. This corporation has already filed an income tax return for 1994 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
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 Section 607.0501, 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. The corporation is duly authorized to do so. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0501, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CLINE, BOBBY J.
ADDRESS	1944 WYNN JOYCE
CITY, ST, ZIP	GARLAND TX
TITLE	VTD
NAME	TAYLOR, J. R
ADDRESS	3695 ENCANTO
CITY, ST, ZIP	FT WORTH TX
TITLE	SD
NAME	BURTON, BARBARA J.
ADDRESS	1925 MERRIMAC TR
CITY, ST, ZIP	GARLAND TX

13. ADDITIONAL CHANGES TO OFFICERS AND/OR DIRECTORS

TITLE	PD	☒ Change ☐ Add
NAME	Oliver, Frances C.	
ADDRESS	2401 London	
CITY, ST, ZIP	Plano, TX 75025	
TITLE	VS	☒ Change ☐ Add
NAME	Sommerfield, Jack	
ADDRESS	3322 Bluffview	
CITY, ST, ZIP	Garland, TX 75043	
TITLE	VT	☒ Change ☐ Add
NAME	Anderson, Ross T.	
ADDRESS	3206 Oak Hill	
CITY, ST, ZIP	Garland, TX 75043	
TITLE	VM	☐ Change ☒ Add
NAME	Hoffmann, Charles W.	
ADDRESS	3424 Eisenhower	
CITY, ST, ZIP	Plano, TX 75023	
TITLE		☐ Change ☐ Add
NAME		
ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Add
NAME		
ADDRESS		
CITY, ST, ZIP		

14. I hereby certify that the information indicated on this report or supplemental report, filed within the prescribed time period, 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 I am aware of the penalties provided for filing false reports.

SIGNATURE: Charles W. Hoffmann — Charles W. Hoffmann — 4-20-95 — (214) 997-0214
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — TELEPHONE NUMBER

0472269 FP